



Public Health
England

Protecting and improving the nation's health

National Child Measurement Programme 2021 Information for schools

For head teachers and school staff

About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-leading science, research, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct delivery organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific and delivery expertise and support.

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The National Child Measurement Programme is focused on tackling childhood obesity in England. Local authorities have a statutory responsibility for delivering the programme, and school participation is voluntary. This advice is primarily for school leaders, school staff and governing bodies in state-maintained schools and academies. It may also be useful for local authorities and parents. It explains the purpose of the programme and what schools can do to support delivery of the programme locally.

If you have queries about the National Child Measurement Programme, you can email Public Health England at ncmp@phe.gov.uk.



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1. Executive summary

1.1. The National Child Measurement Programme (NCMP), also known as the School Height and Weight Checks, is a mandated annual programme delivered by local authorities, which involves measuring the height and weight of all school children in Reception and Year 6. Over 99% (17,000) of eligible state-maintained schools across England, including academies, usually participate in the NCMP.

1.2. Support from schools is crucial to delivering the NCMP. This guidance provides information for school leaders, staff and governing bodies on key tasks that schools can help with to ensure the programme runs smoothly.

1.3. Delivering the NCMP provides vital information that enables local authorities and their partners to plan for and invest in key services to tackle obesity and its wider determinants. It also provides the opportunity to raise parents' awareness of overweight and obesity, its consequences and healthy lifestyle choices.

1.4. Although most children in Reception and Year 6 are a healthy weight, the NCMP data (1) consistently shows that prevalence of obesity doubles between Reception year and Year 6 (from around 10% to around 20%). More than a fifth of Reception and more than a third of Year 6 children are living with overweight or very overweight. There are significant inequalities in terms of very overweight prevalence in children from the most deprived compared with least deprived areas, and between different children from different ethnic groups.¹ Children identified as very overweight are more likely to be ill, be absent from school due to illness, experience health-related limitations and require more medical care than children identified as a healthy weight. Very overweight children are also more likely to suffer from dental caries, type 2 diabetes, breathing difficulties and bone and joint problems and experience mental health problems such as depression, poor mental well-being, bullying and weight stigma. Additionally, children living with obesity are 5 times more likely to be adults living with obesity (2).

1.5 Due to the coronavirus (COVID-19) pandemic and resulting school closures, children's measurements in the NCMP were stopped in March 2020. The programme restarted in April 2021 and given the time constraints and the continued impact of COVID-19, it was recommended that a nationally representative sample of 10% was collected. It is important that the NCMP recommences in 2021 because it will provide population level data to help understand how COVID-19 has impacted children's health

¹ The term 'very overweight' refers to the clinical weight status 'obese'. Whilst the use of the word 'obese' is a clinical classification, the sensitivity and stigma around using this term is acknowledged. PHE encourage all conversations and correspondence with parents in relation to their child's weight status to use the more acceptable term 'very overweight' instead.

including the number living with obesity and the prevalence of inequalities. It will also enable local authorities to engage with parents and families who may need support to achieve and maintain a healthier weight by providing advice and information about services and programmes in their area.

1.6 Evidence shows that adults with COVID-19 who are living with overweight or obesity are at an increased risk of serious COVID-19 complications and death. Changes in adult health behaviours such as increased snacking on foods high in added fats and sugars and reduced levels of physical activity during lockdown have been reported (3). While evidence on the impacts on children's eating and physical activity behaviours is limited, there are concerns that extended school closures may have exacerbated childhood obesity prevalence due to food insecurity and reduced opportunities for children participating in physical activity (4). Sport England's, Children and Young People's Active Lives Coronavirus Survey showed a reduction in the number of active children and young people of 2.3% – or just over 100,000 children – compared to the same time the year before in the summer term (5). Also the annual report showed an increase of 2.4% (201,400) in the proportion of children who are less active, over the last year. 31.3% of children and young people (2.3 million) do less than an average of 30 minutes a day (6).

1.7 A child's weight category affects their health and wellbeing. Growing healthily and maintaining a healthy weight is important not only for a child's physical, social and mental wellbeing but also for their capacity to do well at school (7), (8). From September 2020, health education is a statutory requirement for schools.² The new health education curriculum (9) can support schools with teaching pupils how to make good decisions about their own health and wellbeing: a statutory duty that Ofsted inspectors evaluate (10), (11).

1.8 The wellbeing of children and families is very important. Measurements are conducted in a sensitive way, in private and away from other children. The weight and height information is shared with the parent or carer in a feedback letter, where letters are provided. No individual information is shared with the children themselves, teachers or the school. It is a parent's choice if they share the information with their child. If a parent is concerned about their child's growth, weight, body image or eating patterns, NCMP feedback letters provide national and local information to support parents and advise on when to seek further support from a school nurse or general practitioner.

1.9 Parents do react in different ways to receiving their child's NCMP feedback, so guidance is available to help school nursing teams and NCMP delivery staff have

² **Guidance on Health Education** does not apply to independent schools, which must meet the Independent School Standards as set out in the Education (Independent School Standards) Regulations 2014. It does, however, apply to academies and free schools.

supportive conversations with parents about the NCMP and their child's health and growth. The NCMP conversation framework for talking to parents can be viewed [here](#).

1.10 The emotional impact of the NCMP has been researched. Studies show that body image, self-esteem, weight-related teasing and restrictive eating behaviours do not change as a result of being measured or receiving feedback. It was also found that most children (96%, 351 children) are indifferent or unconcerned about being weighed or measured. The small number of children (4%, 13 children) that disliked the process were mainly from Year 6, children aged 10 to 11 years. This reinforces the need for sensitivity when weighing and measuring older children [\(12\)](#), [\(13\)](#).

2. Overview of the NCMP

Background

2.1. The NCMP, also known as school height and weight checks, was established in 2006. Over 99% (approximately 17,000) of eligible state-maintained schools, including academies, participate in the programme. Over one million children in Reception and Year 6 usually have their height and weight measured in schools as part of the programme.

2.2. Public Health England (PHE) has responsibility for the national oversight of the NCMP. The surveillance components of the programme are a mandated public health function of local authorities. Local commissioners and providers have been advised to follow the government COVID-19 guidance required to help enable the safe delivery of the NCMP.

2.3. Data collected through the NCMP is returned to NHS Digital, where it is analysed. A report summarising local and national data is then published. Local areas use this high-quality data to inform the development and delivery of services to tackle child obesity. Nationally it is used to track trends in child obesity levels over time, to inform policy and is key to monitoring progress of the government's [Childhood Obesity Plan Chapter 2 \(14\)](#). [Advancing our health: prevention in the 2020s \(15\)](#) (Chapter 3 of the Childhood Obesity Plan) sets out how the programme can align with digital approaches to support families and health professionals. Tackling child and adult obesity is a renewed and strengthened priority for the government, as is shown in its recently published [strategy](#).

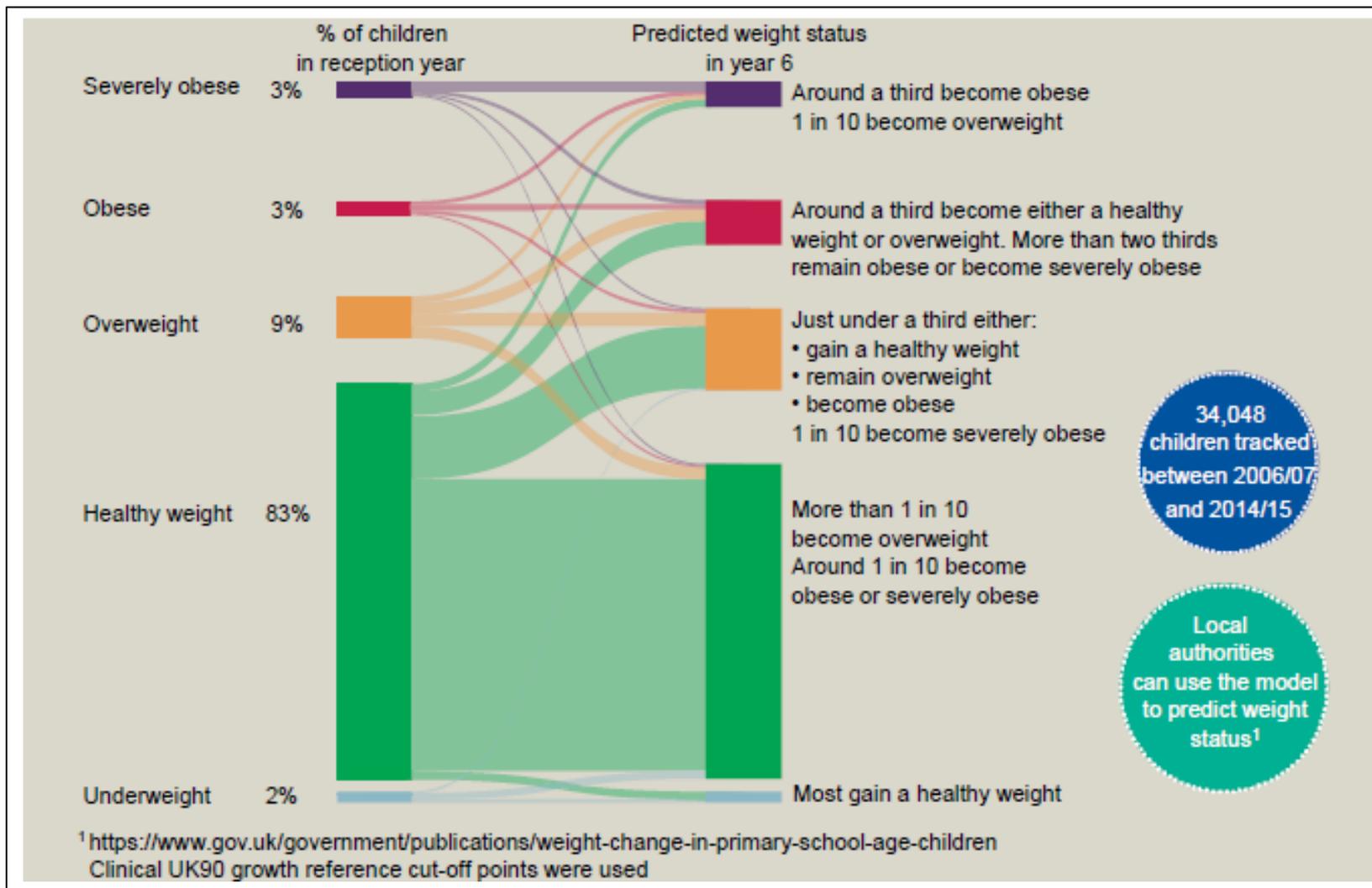
Weight status in primary school

2.4. National data from the NCMP shows that the prevalence of children living with obesity doubles from around 10% of children at the start of primary school to around 20% at the end of primary school. Additionally, year-on-year, the data has shown that

obesity prevalence in the most deprived 10% of areas in England is more than twice that in the least deprived 10% (16). This gap in obesity prevalence by deprivation continues to widen for both Reception and Year 6, and for those children with severe obesity, this gap rises to more than 4 times for both year groups.

2.5. A small sample of 4 local authorities was analysed longitudinally to examine how weight status tracks between Reception and Year 6. The findings (17) suggest that excess weight is likely to persist or worsen during primary school. Those children living in the most deprived areas and certain black and minority ethnic communities may be at higher risk of retaining or gaining an unhealthy weight. An infographic of the findings to show changes in the weight status category of children between the first and final years of primary school is shown in Figure 1 on page 7.

Figure 1: Tracking study 2017 – key findings



This infographic shows changes in the weight category of children between Reception and Year 6 from a small sample of 4 local authorities that were analysed longitudinally. For more information, refer to the [PHE report that was published in 2017](#).

Achieving a healthy weight is important

2.6. When children are a healthy weight, they feel better about themselves. They find it easier to play and learn and they are more likely to grow up healthy too. Helping them to be a healthier weight when they are a child can set up their health and wellbeing for life.

Facts about childhood obesity

2.7. Children who are overweight or very overweight are more likely to develop a variety of illnesses in childhood and later life, such as high blood pressure, high cholesterol, increased risk of type 2 diabetes (pre-diabetes), breathing difficulties, dental caries and bone and joint problems (18),(19). Health is not the only issue. Children living with obesity are also impacted by emotional and social issues such as:

- poorer emotional well-being
- being at a higher risk of depression
- developing an eating disorder in older children
- lower body image and self-esteem
- teasing or bullying
- behavioural problems
- avoidance of active play or learning opportunities in school sport and PE (20), (21), (22), (23)

Children living with severe and persistent obesity are more comprised, it's important to note that many children living with obesity are psychologically well have high self-esteem and do not suffer major depression.

This can have an impact on:

- a child's attendance, as they may need to miss school for medical appointments or treatment
- a child's learning and academic achievement
- a child's sleep: sleep deprived children are less likely to perform well academically
- staff training and expertise, because staff may need to provide extra support to children with health problems arising from overweight and obesity to ensure they manage their condition effectively during the school day

The importance of school participation

2.8 Supporting the NCMP and embedding it in a whole school approach to health and wellbeing will:

- support pupils to gain the knowledge and skills required for good health and wellbeing
- support the delivery of the new health education curriculum which became a statutory requirement in September 2020
- help schools to demonstrate to Ofsted that they are considering the health and wellbeing of their pupils and helping them know how to keep physically healthy

2.9 Supporting the delivery of the NCMP in your school ensures that vital information is available to help local authorities and their partners plan, target and deliver services to promote children's healthy weight and growth; manage both underweight and excess weight (overweight and obesity) and in turn address the issues set out above.

2.10 Local authorities may also share individual height and weight measurements and calculated weight category with each child's parent, by sending a letter typically via post from the NCMP provider directly to the parent. PHE have produced a template letter (also known as a '[specimen result letter to parents](#)') for local authorities which can be used and adapted locally. This letter contains web links to the [NHS BMI Healthy Weight Calculator](#) and the [Change4Life](#) website; both of which can support and encourage parents to monitor their child's growth and to adopt healthier lifestyle behaviours. This is particularly important for parents and families who may need additional support to achieve and maintain a healthier weight due to the impact lockdown has had on healthy lifestyle behaviours.

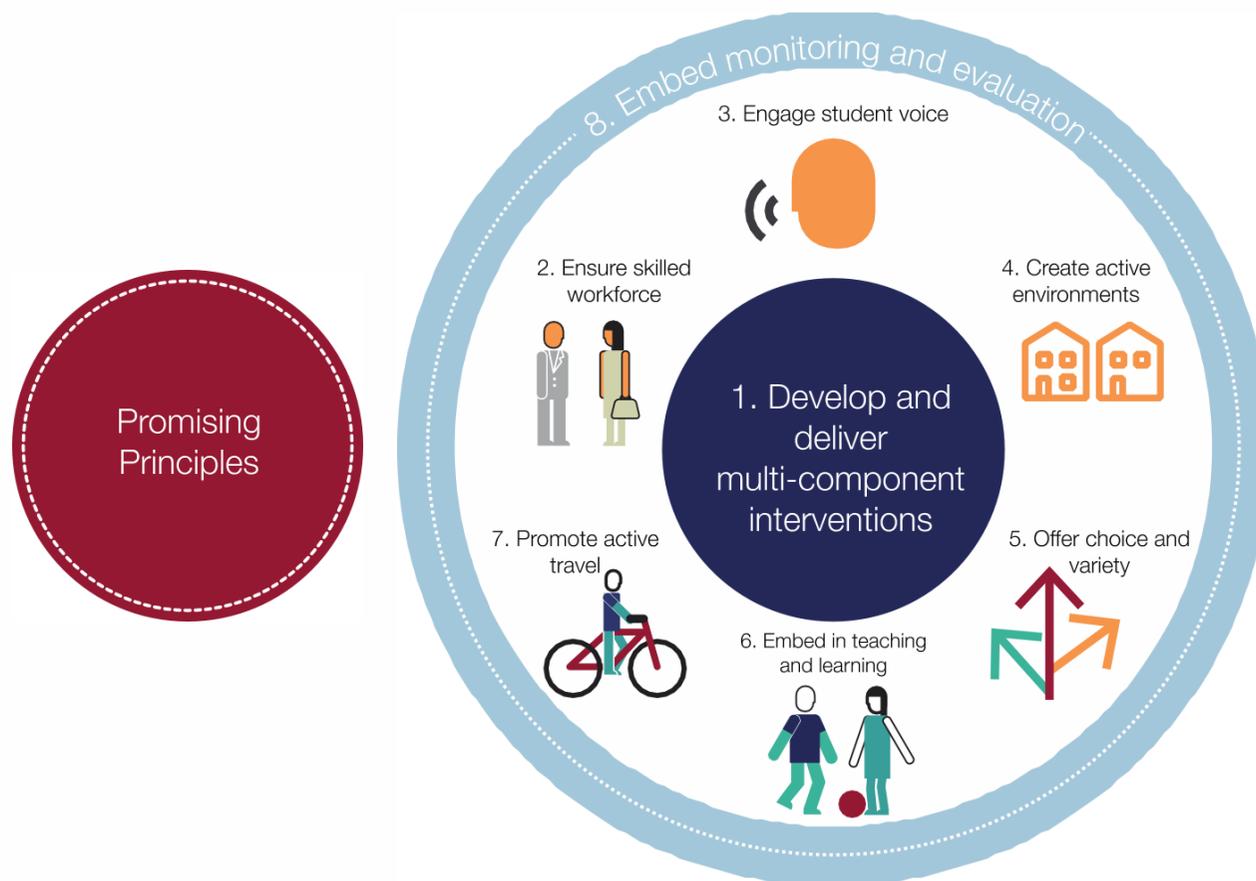
2.11 Because many children in England are now carrying excess weight, parents and health professionals often cannot tell, just by looking at a child, whether he or she falls within a healthy weight range. This is why taking an objective measurement by trained health professionals through the NCMP and sharing that information with parents is important.

2.12 Information on the prevalence of school overweight and obesity, over a three year average, compared with local and national averages, can be shared with schools via a bespoke [NCMP School Feedback Letter](#). Local authorities send these letters. The letter also includes details of resources to encourage whole school action to increase health and wellbeing, including healthy eating and increasing physical activity (see resources section). In conjunction with action taken by local authorities, this can make a real difference in preventing the continued increase of excess weight in children from Reception to Year 6, benefiting not only the health and wellbeing of pupils but also their learning and achievement in school.

2.13 PHE has published a resource for headteachers, [What works in schools and colleges to increase levels of physical activity in children and young people?](#) This resource brings together key guidance and policy documents on increasing physical

activity in children and young people alongside local examples. It has been produced to support schools and colleges in order to develop and implement practical, effective evidence-based approaches utilising eight key principles as shown in Figure 2 on page 12.

Figure 2: Promising principles for practice from ‘What works in schools and colleges to increase levels of physical activity in children and young people?’



This figure includes the 8 promising principles; develop and deliver multi-component interventions, ensure skilled workforce, engage student voice, create active environments, offer choice and variety, embed in teaching and learning, promote active travel and, embed monitoring and evaluation.

3. The role and responsibilities of local authorities

3.1. Delivery of the programme, including the height and weight measurements and returning relevant data to NHS Digital; is a statutory function of local authorities set out in legislation. Local authorities, or the provider organisations they commission, will follow the process shown in [The Delivery Elements of NCMP](#) when implementing the programme and in doing so will be responsible for:

3.2 Ensuring that, either, a registered medical practitioner, registered nurse, for example school nurse, or registered dietitian oversees the implementation of the programme.

3.3 Securing the class-list information on children in Reception and Year 6, including school name and unique reference number, pupil name, gender, date of birth, ethnicity code, home address and postcode, by liaising either directly with schools or with their local authority education officer. A parent's email address and telephone number may also be required if digital communication methods are being used and proactive feedback calls are planned by the local authority or NCMP provider.

3.4 It is lawful under the General Data Protection Regulation (GDPR) and Data Protection Act 2018 (DPA 2018) for schools to continue to provide class lists to the local authority or those working on behalf of the local authority to carry out the height and weight measurements. For more information, see section 'Supporting NCMP and the General Data Protection Regulation (GDPR)/Data Protection Act (DPA) 2018: advice for schools'.

Developing and disseminating a pre-measurement letter to parents

3.5 As consent is not the lawful basis for processing NCMP data under the GDPR/DPA 2018, there is no requirement for schools to obtain the consent of parents in order to provide class lists to school nursing teams and NCMP providers. However, local authorities are required to take steps to ensure parents understand the value of having their child measured and are provided with a reasonable opportunity to withdraw their child from participating in the programme.

3.6 PHE has developed a [specimen pre-measurement letter for parents](#), which ensures that the information provided to parents on the processing of their children's height and weight data meets the requirements of the GDPR/DPA 2018. The letter also acts as the privacy notice and must be sent to all children eligible to take part in the NCMP. Parents

must be sent this letter at least 2 weeks before the measurements are scheduled to take place.

Raising awareness of the programme among parents, school leaders and staff, children and governors

3.7 Many NCMP leads⁴ will seek to include short articles in school newsletters, provide governors with information and deliver assemblies to ensure parents, children and teachers understand what the programme involves and why it is done.

Planning for and carrying out the height and weight checks

3.8 Planning the logistics of measuring children's height and weight and liaising with schools to arrange appropriate days and times to take measurements. National and local COVID-19 guidance should be referred to in order to inform the planning and delivery of NCMP measurements. The following links advise on the necessary adjustments required to help enable the safe delivery of the NCMP:

- [Actions for schools during the coronavirus outbreak](#)
- [Use of PPE in education, childcare and children's social care](#)

3.9 Taking the height and weight measurements of children in Reception and Year 6 and returning the data collected to NHS Digital. This contributes to the annual national statistics report publication.

Optional feedback

3.10 Check with your local NCMP lead whether feedback to parents or feedback to schools is provided:

Feedback to parents

Providing parents with feedback, within 6 weeks of measurement, either in the form of a **result letter** or through a telephone call. The feedback provides parents with individually tailored information on their child's height, weight and weight category (either underweight, healthy weight, overweight, or very overweight), together with signposting to sources of local support and advice as well as national support such as a link to the **Your Child's Weight** page on the Change4Life website.

⁴ The local NCMP lead is your first point of contact and could be your local authority public health team or an NCMP provider such as a school nursing service or commissioned service that delivers the height and weight measures

Feedback to schools

Providing schools with feedback on how overweight and obesity prevalence at their school compares with the local or national average by sending the **NCMP School Feedback Letter**.

4. Supporting delivery of the NCMP in your school

4.1 Your local authority is responsible for delivering the NCMP. However, the programme has been most successful in areas where schools have provided support. Therefore, local NCMP leads may contact your school to ask for your help by:

Providing them with a class list for all children in Reception and Year 6

Containing the school name and unique reference number, and the name, gender, date of birth, ethnicity code, home postcode, home address and home telephone number of each pupil. It is lawful under the GDPR/DPA 2018 for schools to continue to provide class lists to NCMP providers for the purposes of the NCMP. For more information, see section: 'Supporting NCMP and the General Data Protection Regulation (GDPR)/Data Protection Act (DPA) 2018: advice for schools'.

Checking there are no new starters missing from the class list

Some local authorities request the class list electronically to move towards a paperless way of working.

Letting them know if there are any children on the class list who are not eligible to participate in the height and weight checks because they are unable to stand unaided

The NCMP lead can make alternative arrangements for these children (a **specimen letter to parents of children unable to be measured unaided** can be sent to parents).

Letting them know that there are children with Down's syndrome

Children with Down's syndrome should be included in the NCMP activity on measurement day as appropriate. However, the NCMP provider will need to use a specialist growth chart and provide parents with an adapted result letter.

Facilitating the dissemination of the **pre-measurement letter to parents**

The local authority is responsible for ensuring that parents are informed about the NCMP, including how their child's data will be stored and processed. The pre-measurement letter also gives parents the opportunity to withdraw their child from the programme. Your local NCMP lead may seek your support to send pre-measurement letters electronically or through the pupil post. Local authorities may also ask for the **pre-measurement leaflet for parents: school height and weight measurements** to be disseminated along with the pre-measurement letter for parents. This leaflet helps parents understand the NCMP process and why healthy weight is important for a child's health and wellbeing.

Letting the local authority know if any parents have withdrawn their child

Although parents will be asked via the pre-measurement letter to let the local authority know if they have chosen to withdraw their child, some parents may respond directly to the school. Relaying this information to the NCMP lead will ensure that parents' wishes are respected.

Confirming a convenient day(s) and time(s) for NCMP staff to come into the school to measure the height and weight of children in Reception and Year 6

Providing a room(s) where children's height and weight can be measured and a member of staff to help with supervising children's movement to and from the room(s)

Ideally it is important that each child's height and weight is measured in privacy, without being seen or heard by other pupils. Schools will need to identify a private area, with adequate space and appropriate flooring (that is level, non-carpeted flooring to ensure that scales give an accurate reading). If a separate room is not available, a screened-off area can be used.

Promoting robust hand and respiratory hygiene

The availability of facilities for handwashing is of increased importance for NCMP staff, students and school staff to help control the infection.

Raising awareness of the NCMP

The NCMP has been successful in areas where governors, parents and children have a good understanding and awareness of the programme and its importance. The local NCMP lead may liaise with you to arrange engagement sessions such as plan an

assembly where the NCMP lead can talk to children about the programme, include an article on the NCMP in the school newsletter, or share information on the programme with governors.

Embedding NCMP as part of a whole school approach to health and wellbeing

A whole school approach (24) is one that goes beyond the learning and teaching in the classroom to pervade all aspects of the life of a school including:

- culture, ethos and environment: the health and wellbeing of students and staff is promoted through the 'hidden' or 'informal' curriculum, including leadership practice, the school's values and attitudes, together with the social and physical environment
- learning and teaching: using the curriculum to develop pupils' knowledge, attitudes and skills about health and wellbeing
- partnerships with families and the community: proactive engagement with families, outside agencies, and the wider community to promote consistent support for children and young people's health and wellbeing

Embedding the NCMP as part of a whole school approach to health and wellbeing can complement teaching about physical health, fitness and healthy eating which are an integral part of statutory Health Education.

Make full use of the **Our Healthy Year** resources

A pack of Change4Life resources called 'Our Healthy Year' is available for head teachers, Reception and Year 6 teachers, to help them teach pupils about leading healthy lifestyles in the years in which they are weighed and measured as part of the NCMP. There are ideas for whole school activities and suggestions for engaging parents.

Providing parents with contact details if they have any questions

Some parents wish to discuss their child's result with someone. So, giving the parent the correct details that the NCMP lead has provided to you will help parents receive support quickly.

5. Supporting NCMP and the General Data Protection Regulation (GDPR)/Data Protection Act 2018(DPA 2018): advice for schools

5.1 Under the GDPR all processing of personal data must have a lawful basis. The legal foundation for the NCMP is provided in local authority regulations (25), (26). This statutory authority means that the lawful basis for the NCMP is provided by the Articles of the GDPR covering:

- compliance with a legal obligation
- exercise of official authority
- provision of health or social care
- public interest in the area of public health

Consent is not the lawful basis for the processing of NCMP data.

5.2 Schools have a legal obligation to release pupil's personal information. Schools do not require parental consent to share a pupils' personal information for the purposes of participating in the NCMP.

As consent is not the lawful basis for processing NCMP data under the GDPR/DPA 2018, there is no requirement for schools to obtain the consent of parents to provide class lists to school nursing teams and NCMP providers. This sharing continues to be lawful under the GDPR/DPA 2018. All parties involved should be following information governance guidance regarding the secure transfer of personal data.

5.3 The NCMP Regulations state that parents must be given an opportunity to withdraw their child from the programme. This requirement is covered by sending them a pre-measurement letter at least 2 weeks prior to being measured. PHE has developed a [specimen pre-measurement letter \(to parents\)](#) for local authorities, which complies with the requirements of the GDPR/DPA 2018 including detailed information on what happens to the child's data and information on how to withdraw. Schools may be asked to support dissemination of this letter to parents (see section 'Supporting Delivery of the NCMP in your School').

5.4 Further guidance on schools sharing information with the school nursing team or providers for the NCMP is provided in the [NCMP Operational Guidance \(27\)](#).

Key point

5.5 No change is required to the way in which the NCMP data is collected and processed for this to continue to be lawful under the GDPR/DPA 2018.

6. Resources

National Child Measurement Programme (NCMP) and COVID-19	Description
Actions for schools during the coronavirus outbreak	This guidance advises what all schools will need to do during the coronavirus (COVID-19) pandemic.
Use of PPE in education, childcare and children's social care	Explains when to use PPE in education, childcare and children's social care settings for COVID-19.
NCMP Collection	
Operational Guidance	Guidance for local commissioners, providers and schools on running the NCMP.
Deliverable Elements of NCMP	A table showing an overview of the programme with web links to relevant documents.
Specimen letters to parents: Specimen pre-measurement letter to parents (mandatory to send to parents) Specimen letter to parents of children unable to be measured unaided specimen result letters to parents	Specimen letters for local authorities to adapt, based on local arrangements.
Information for schools and specimen pre-measurement letter for head teachers	To be sent to head teachers in advance of starting the height and weight checks every school year.
Pre-measurement leaflet for parents: school height and weight measurements To send with the pre-measurement letter.	This leaflet helps parents understand the NCMP process and why healthy weight is important for a child's health and wellbeing. Available for download only from the PHE Campaign Resource Centre. Please note: an account will need to be set up on the Campaign Resource Centre to download this resource.
Post-measurement leaflet for parents: Change4Life top tips to keep your family healthy and happy To send with the result letters.	This leaflet provides simple tips to help families eat well and move more and highlights the additional ideas available on the Change4Life website.

	<p>These are available from the PHE Campaign Resource Centre.</p> <p>Please note: an account will need to be set up on the Campaign Resource Centre to order copies of this resource.</p>
NCMP School Feedback Letters	
School feedback cover letter template	Letter templates for local authorities to send to schools participating in the NCMP. Intended to be edited, to include details of any local primary care providers, weight management and support services.
School feedback example letter	An example of a letter sent to schools by their local authority which includes non-identifiable average 3-year NCMP data.
School feedback cluster example letter	An example of a cluster letter sent to schools by some local authorities, which includes non-identifiable 3-year NCMP combined data for 2 or more schools.
Change4Life: Our Healthy Year resources	
A downloadable pack of Change4Life resources called Our Healthy Year is available on the School Zone.	These include resources for: Head teachers, Reception and Year 6 teachers to help them teach their pupils about healthy lifestyles. Includes ideas for whole school activities to encourage eating well and moving more, as well as suggestions for engaging parents. Teachers can subscribe to Change4Life School Zone keep up-to-date with new materials and campaigns.
Change4Life: 'Your child's weight' page	<p>A web link for parents.</p> <p>Information for parents providing more support and advice on receiving their child's feedback letter, following their child's school height and weight check.</p>
Resources to encourage physical activity	
What works in schools and colleges to increase physical activity?	A resource for head teachers, college principals, staff working in education settings, school nurses, directors of public health, county sports partnerships and wider partners: An overview of the evidence and local examples about what works in schools and colleges to increase levels of physical activity in children and young people.
Active Mile Briefings	Provides information about the evidence on active mile initiatives, ideas for how to implement them and examples of practice.
Healthy Rating Scheme	A self-assessment tool for schools to rate

	their food education, compliance with the school food standards, time spent on physical education and the promotion of active travel.
School Sport and Activity Action Plan	A cross-government action plan to provide pupils with greater opportunity to access 60 minutes of sport and physical activity every day.
Active School Planner	A free-to-use interactive tool for schools to review and improve the physical activity offer to their pupils.
Change4Life Sports Clubs	Can help contribute to all children getting at least 30 minutes of physical activity in every school day.
School Games	Inspiring millions of young people across the country to take part in appropriate competitive school sport.
PE and sport premium for primary schools	How to invest in sport premium funding to increase physical activity levels.
School capital funding allocations	Guidance on direct allocations of the Healthy Pupils Capital Fund to local authorities and multi-academy trusts.
Physical activity guidelines for 5- to 18-year-olds	Chief Medical Officer's physical activity guidelines infographic for 5- to 18-year-olds.
The Daily Mile	A simple and free initiative to encourage children to run, walk or jog for 15 minutes every day.
Resources to encourage healthy eating	
School Food Plan training resource	A resource to help all school staff understand the importance of a good school food culture.
The Eatwell Guide image and Eatwell Guide booklet	A tool used to define government recommendations on eating healthily and achieving a balanced diet.
Let's Get Cooking and the Learning Network	An e-learning platform with 15 courses for schools and caterers related to improving food for children.
Resources to encourage emotional health and wellbeing	
Relationships Education, Relationships and Sex Education (RSE) and Health Education	The new curriculum is compulsory from September 2020. Schools should start teaching from that date if they meet the statutory requirements. If they are not ready, or are unable to meet the requirements, they should begin teaching by at least the start of the summer term 2021.
Promoting children and young people's emotional health and wellbeing	Guidance on the 8 principles for promoting emotional health and wellbeing in schools.
PSHE Association	Resource library including lesson plans and

	assessment tools to help develop the RSHE curriculum.
MindEd	MindEd is a free educational resource on children and young people's mental health for all adults.
Teaching about mental wellbeing	Practical materials for primary and secondary schools to use to train staff about teaching mental wellbeing.

7. References

1. NHS Digital. [National Child Measurement Programme, annual reports 2020](#)
2. [Time to solve childhood obesity: an independent report by the Chief Medical Officer 2019](#)
3. [Excess weight and COVID-19: insights from new evidence 2020](#)
4. Rundle A and others. [COVID-19 – Related School Closings and Risk of Weight Gain Among Children Obesity 2020: volume 28](#)
5. [Active Lives Children and Young People Survey Coronavirus \(Covid-19\) Report Sport England 2020](#)
6. [Active Lives Children and Young People Survey Sport England 2021](#)
7. Public Health England. [The link between pupil health and wellbeing and attainment November 2014](#)
8. University of London. [Childhood obesity and educational attainment: A systematic review January 2011](#)
9. Department for Education. [Relationships education, relationships and sex education \(RSE\) and health education 2019](#)
10. Department for Education. [Schools Statutory Guidance 2017](#)
11. [Ofsted Education inspection framework 2019](#)
12. Grimmett C and others. [Telling Parents Their Child's Weight Status: Psychological Impact of a Weight-Screening Program Pediatrics 2008](#)
13. Viner RM and others. [Improving the assessment and management of obesity in UK children and adolescents: the PROMISE research programme including a RCT Programme Grants Applied Research 2020](#)
14. HM Government. [Childhood obesity: a plan for action, chapter 2 2018](#)
15. Cabinet Office and Department for Health and Social Care [The Prevention Green Paper: Advancing our health: prevention in the 2020s 2019](#)
16. [Obesity, diet and physical activity: Childhood obesity patterns and trends 2021](#)
17. Public Health England. [Changes in the weight status of children between the first and final years of primary school 2017](#)
18. Public Health England. [Childhood obesity: applying All Our Health 2015](#)

19. Davies SC. **Time to Solve Childhood Obesity, Department of Health Social Care Annex B: The health and societal costs of childhood overweight and obesity** 2019
20. Rankin J and others. **Psychological consequences of childhood obesity: psychiatric comorbidity and prevention** Adolescent Health, Medicine and Therapeutics 2016
21. Hill AJ. **Obesity in Children and the 'Myth of Psychological Maladjustment': Self-Esteem in the Spotlight** Current Obesity Reports 2017
22. Griffiths LJ and others. **Self-esteem and quality of life in obese children and adolescents: a systematic review** International Journal of Pediatric Obesity 2010
23. Carl J Palad and others. **Weight stigma and its impact on paediatric care** Current Opinion Endocrinology, Diabetes and Obesity 2019
24. World Health Organization. **Health Promoting School framework for improving the health and well-being of students and their academic achievement (Review)** 2014
25. The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) **Regulations 2013 No.218**
26. The Local Authorities (Public Health Functions and Entry to Premises by Local Health-watch Representatives) **Regulations 2013 No.351.**
27. **National Child Measurement Programme Operational Guidance 2021**