



Governor Visit Record

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| Date | 15.05.2024 | Governors | Gill Finch, Karyn McMahon |
| Objectives for | | | |
| Whole school and governing body to consider the school accessibility objective of food and nutrition and the wider safeguarding implications of the innovative work being undertaken in this area of the curriculum and of school life. | | | |
| Links with 5 Year School Development Plan | | | |
| Background preparation: I read the recently published Free School Meals guidance from the DfE | | | |
| Scope of visit / Breadth of visit Scrutiny Food and nutrition are much more than 'school dinners'. Children at CHS have complex specific sensory needs, many are reluctant to explore new foods and do restrict their intake to predictable, processed 'beige foods'. ARFID (Avoidant Restrictive Food Intake Intake Disorder) is commonplace, as are children and young people whose appetite is diminished by medication, for ADHD, for example. Developing complex feeding difficulties cause significant stress within a family, as well as anxiety for a child who may become increasingly reactionary and hyper-vigilant around food and meal times. This is in addition to the nutritional difficulties of a restricted diet and also the medical problems, for eg. causing spikes in insulin and making diabetes difficult to manage. We were joined by Abby Tolley who is leading this strand in school. Abby has developed a graduated response to food and nutrition in school. She has joined the North East ARFID Champions NHS Group and is working with the Therapy Team and PD Lead in school to develop and implement a strategy around food and nutrition. In addition to PSHEE curriculum promoting healthy lifestyles and developing independence and life skills in order to be nourished, cooking and nutrition also has a place on the curriculum as part of Design Technology. The new guidance to schools from the DfE states that examples of reasonable adjustments for FSM pupils with SEND might include: <i>A child has autism which results in sensory processing difficulties leading to a restricted diet. As a result, the child is unable to access free school meals which comply with the relevant food standards. The school, having engaged with the parent/carers and the child, determines that a suitable reasonable adjustment would be to issue food vouchers to the child's parents so they can provide a packed lunch that the child will eat.</i> This visit was the annual governor update on the contribution of the curriculum to safeguarding. | | | |
| Governor Observations and Comments | | | |

The focus on food, nutrition and the relationship between children and young people and nourishment, independence and even careers in catering and food preparation was a refreshing perspective on safeguarding and preparing for adulthood.

Magic Breakfast is available to all children and provides opportunities for the development of functional skills; pouring cereal, chopping, pulling a chair closer to the table. Sitting with adults who model curiosity and flexibility, talking about textures, strong smells, sensory aversions and experimentation is the start to the day for many of the children.

There are mini-kitchens in classrooms, so that group preparation of new or topical foods can be introduced; for example, making pasta from scratch, in a safe, pressure-free environment. Cooking it together and trying something new.

Staff are aware that the higher the uncertainty, the higher the worry, the higher the hyper-vigilance, the greater the panic, the lower the appetite.

Staff remember that growth is more important than dietary range and accommodation is made for children to eat and drink their preferred food choices.

Food diaries are opportunities to maintain a dialogue with home and even a means of opening dialogue with nutritionists and other health professionals working to support a healthy and nutritionally fulfilling range of foods, especially for children with extremely restricted intake, for example a milk only diet.

The school kitchen staff manage very well to cater to the needs of the pupils with restrictive diets; diet is frequently one of the things a child feels they can control: Abby explained the 'breadsticks vs blueberries' mindset that affects children who prefer predictable foods: a breadstick will always taste the same, however a blueberry could be sweet, tart, sharp or bland. You can't guess by looking at it.

Therapies are integrated not only into the practical skills of cutting, stabbing and chewing food. Therapists also develop skills around refusing food, (it's OK not to like some foods), boundaries and where and how it is appropriate to refuse or spit out food.

Children learn that if a food is not their trusted food that they shouldn't find it being sneaked into their diet, nor should they be tricked into eating things; a practical and valuable way to model important topics such as consent and coercion.

Abby conducted some research into tiered afternoon tea stands as a way of developing flexibility/experimentation, with 'safe foods' on the bottom tier, 'try it' foods in the middle and something new and adventurous on the top.

Children use choice boards and vision boards to communicate their preferences and anticipate mealtimes, which can sometimes be stressful.

The school hall has had sound-proofing added on the ceiling of the school hall in an attempt to reduce it being a difficult place to spend time in. Alternative places for eating, for eg, in 'family' groups in classrooms, in a class allocated as a quiet room and eating outside, are all offered.

The meeting was reassuring, informative and inspiring. I'd like to thank Abby for her commitment and vision for this important aspect of school life.

Issues to be raised with the Full Governing Body (if any)

Plans for Follow-up Visit

Date reviewed at FGB: