

Appendix 1

THE SPECIFICATION

GREATER LONDON AUTHORITY

**GLA 82385 Whole School Approach to Mental
Health Programme Evaluation and
Research Partner**

Background

1. In his 2024 manifesto, the Mayor outlined his commitment to ‘piloting new mental health initiatives focused in and around secondary schools’. The Mayor also has a statutory duty to produce a health inequalities strategy and this provides a framework under which this work is taking place.
2. Schools are ideally placed to identify and minimise the risk factors that might lead a child or young person developing mental ill health with 50% of mental health problems develop before age 14.
3. The Mayor supports several programmes that run in educational settings. These include Inclusive and Nurturing Schools (to reduce exclusions and improve peer and student-staff relationships) and Healthy Schools London (an award programme to encourage schools to holistically support children’s health and wellbeing). However, these do not have a specific focus on mental health and wellbeing.
4. It is important to support young people who have issues with their wellbeing as early as possible to stop low-level problems from developing in complexity later in life.
5. The Greater London Authority (GLA) had decided to focus on implementing a Whole School Approach (WSA) in 16 of London’s secondary schools.
6. For the purposes of this specification a whole school approach is defined as “a co-ordinated approach across an educational setting to promote emotional wellbeing, identify emotional and mental health difficulties at an early stage, and provide support to those who need it (either in school or by signposting to external agencies)” (Procter et al, 2024)¹.
7. The WSA delivery partner will be confirmed by June/July 2025, with the delivery of the programme starting with the new academic year in September 2025. The programme will be funded across two financial years (2025/26, 2026/27) and run for one academic year (September 2025-July 2026).
8. The GLA is seeking an Evaluation and Research Partner for WSA programme to design and deliver a high-quality evaluation to explore the impact of the programme against specified desired outcomes. Contract is planned to start in September 2025.
9. The maximum budget for the evaluation is £80,000 across 18 months.

Mental health need in children and young people (CYP) in London

1. There is an increasing burden of mental health need among children and young people in London which is not matched by increase in NHS Children and Adolescent Mental Health Services (CAMHS) capacity. There were 60,000 individuals in contact with children and young people mental health services in London in June 2024- this has

¹ Procter, Tanya; Roberts, Lucy; Macdonald, Ian; Morgan-Claire, Alice; Randell, Becca; Banerjee, Robin (2021). Best practice review of whole school approach (WSA) in the South-East of England. NIHR applied research collaboration Kent, Surrey and Sussex. University of Sussex. Report. <https://hdl.handle.net/10779/uos.25335520.v1>

been steadily increasing since pre-pandemic. There were 159.9 hospital admissions per 100,000 people for self-harm among 10–24-year-olds in London.

2. The proportion of 10-15-year-olds in London with a probable mental disorder has increased from 8% in 2009-2010 to 19% in 2021-2022.
3. Most young people referred to mental health care do not receive it and there is a risk of those with low/moderate (early intervention) needs falling through the gap in support. There will also be a therapeutic iceberg of those who have mental health needs but do not try to access services.
4. In England in 2022-2023, only 32% of children and young people referred to mental health services received support- the remainder were still waiting, or their referral was closed before support could be accessed (usually this is because they do not meet thresholds for CAMHS).
5. NHS Mental Health Support Teams (MHSTs) provide targeted support in schools to pupils with mental health needs and support the implementation of a WSA. In London, the MHST ambition is to provide support to all 2,712 schools. According to data from the eighth wave of the MHST programme, MHST teams are present in 1230 schools. T
6. An evaluation of MHSTs implementation of WSAs found huge potential of the teams in improving school culture and community towards mental health. It found that senior leadership in schools was committed to implementing a WSA and found the support of MHSTs to be especially valuable for young people with low to moderate mental health needs.²
7. NICE guidance recommends adopting a WSA: the committee "regarded the whole-school approach as a framework that other interventions can slot into. They noted that interventions such as targeted support have a better chance of success if schools actively engage with local agencies. They also agreed that, to be effective, a whole-school approach needed monitoring and evaluating to make sure the approach was working."³

WSA programme delivery

1. The Delivery partner will work across eight London Boroughs: Bexley, Greenwich, Camden, Haringey, Southwark, Lambeth, Newham and Tower Hamlets. Boroughs have been selected by the GLA based on a set of social, health, and educational criteria including CAMHS waiting lists, child poverty rates, index of multiple deprivation, school absence rates, and young people from ethnic minority backgrounds.
2. The £730,000 whole school approach programme will work to improve the ethos and culture of 16 schools (2 selected by each of the above eight boroughs) over the programme's 18 months. A WSA focuses on system change and thus this programme will aim to keep children supported, healthy, and thriving in school, while reducing emotionally based absences, instilling resilience and healthy coping mechanisms, and

² Procter, Tanya; Roberts, Lucy; Macdonald, Ian; Morgan-Clare, Alice; Randell, Becca; Banerjee, Robin (2021). Best practice review of whole school approach (WSA) in the South-East of England. NIHR applied research collaboration Kent, Surrey and Sussex. University of Sussex. Report. <https://hdl.handle.net/10779/uos.25335520.v1>

³ [Recommendations | Social, emotional and mental wellbeing in primary and secondary education | Guidance | NICE](#)

ensuring that they can approach any staff member if they are in distress and have their mental health needs met.

3. The key components of the programme delivery are:
 - a. Developing and delivering bespoke programmes for schools which support the whole school community to become more understanding and supportive of young people's mental health and wellbeing needs;
 - b. Firstly, the delivery partner will complete individualised assessments for the included schools to understand the baseline of the school's culture, ethos, practices, and policies towards mental health and wellbeing;
 - c. The delivery partner will use the results of the audit to develop a bespoke whole school approach plan to build on and improve the expertise and capabilities of schools and local authorities to identify and meet pupils' needs.
4. The delivery will be based on the eight components of a WSA, as defined by Public Health England and Department for Education, although the combination of interventions will differ between schools based on need and existing support⁴:
 - a. Leadership and management that support and champions efforts to promote emotional health and wellbeing;
 - b. Curriculum teaching and learning to promote resilience and support social and emotional learning;
 - c. Enabling student voice to influence decisions;
 - d. Staff development to support their own wellbeing and that of students;
 - e. Identifying need and monitoring impact of interventions;
 - f. Working with parents and carers;
 - g. Targeted support and appropriate referral;
 - h. An ethos and environment that promotes respect and values diversity.
5. The programme objectives are:
 - a. Build sustainable partnership with London Boroughs, schools and wider regional partners to co-produce and deliver the programme;
 - b. Equip school staff with the skills and knowledge on mental health awareness, early intervention techniques and how to support students with mental health issues;
 - c. Provide stronger support networks for young people with clear access routes for help with their mental health and wellbeing;
 - d. Engage parents and carers to ensure there is an understanding of the changes being made at school and how mental health and wellbeing support can translate into the home;

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[Promoting children and young people's mental health and wellbeing \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

- e. Promote student voice: encourage students to become involved in decision-making processes related to new mental health initiatives;
- f. Build a community of practice: support participating schools to work together on their Whole School Approaches and share best practice.

Outcomes

1. The WSA programme aims to achieve the following outcomes

	Outcomes
Pupils in participating schools/colleges	Improved mental wellbeing
	Improved feeling of support by, and belonging in, the school environment
	Improved ability to respond to stress or trauma
	Improved understanding of mental health and wellbeing and how they can support themselves and peers
	Increased engagement in decision-making
Education settings and staff	Improved knowledge and understanding of pupils' needs
	Improved staff attitudes towards, and consistency in applying a supportive environment towards mental health
	Increased collaboration with young people in shaping the school environment
	Increased confidence in responding to the social and emotional needs of all children and young people
	Improved understanding, confidence and transparency in school about the impacts of adverse childhood events, mental ill-health and mental distress, and support needs related to these
	Improved understanding and confidence in supporting young people around periods of stress for young people (transitions, exams)
	Improved understanding of the internal and external support available to young people with mental health needs/illness and how to refer
	A more inclusive approach to behavioural difficulties with reduced emphasis on punitive measures and exclusion, which take account underlying mental health needs
	Longer term: Reduction in emotionally based school avoidance
	Longer term: Improved measures of wellbeing
Local Authority	Increased access and use of community resources and support
	Improved collaboration and knowledge-sharing with other local authorities and the NHS on mental health and wellbeing amongst children and young people.
	Longer term: Reduction in emotionally based school avoidance

2. Programme KPIs may include:

- a. 16 secondary schools implementing a WSA to support students mental health and wellbeing (if a school drops out before the action plan is submitted, we will ask the borough to identify another school, but there must be a cut off point;
- b. Eight boroughs with enhanced support for schools to implement a WSA;
- c. Increase in staff's confidence to support students' mental health and wellbeing;
- d. Increase in the number of students' experiencing a positive change around mental health and wellbeing awareness and support.

Objectives for the Evaluation and Research Partner

1. The programme evaluation will be completed using rigorous research methods, to a sufficient scientific standard to allow peer-reviewed publication of the findings.
2. The key objectives of the evaluation are:
 - a. Assess the implementation and effectiveness of the project;
 - b. Evaluate fidelity of the implementation across different schools;
 - c. Assess the role of boroughs in supporting delivery of the programme as a key partner and stakeholder;
 - d. Identify what works to improve CYP MH and wellbeing in what contexts within the school environment;
 - e. Increase understanding of the impact on school culture, staff confidence and student voice on CYP wellbeing;
 - f. Provide recommendations for improvement and sustainability.

Evaluation and Research Partner

1. As an evidence-based organisation, the GLA uses research and analysis to help inform our decisions and work. This involves conducting or commissioning research and evaluation to help understand how commissioned services are working, and whether services are delivering the results we expect.
2. The GLA welcomes innovative evaluation methods.
3. The Evaluation and Research Partner will be required to work in close collaboration with the delivery partner and the GLA to design, develop and deliver a suitable evaluation model for this programme, including collaboratively reviewing established monitoring processes to support the evaluation. The GLA and our delivery partner can support the Evaluation and Research Partner to obtain access, within reason, to any data that would support the evaluation aims.
4. The Evaluation and Research Partner should work with the programme delivery partner to collect data where necessary, for example using:
 - a. Focus groups;
 - b. Questionnaires, using validated tools wherever possible (this may include: #Beewell Survey, Boxall Profile®, School Environment Questionnaire, Mind Stigma Score, Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS));
 - c. Observational data.
5. Progress towards the programme's outcomes should be measured at baseline, during, and after programme delivery, where approach, and use quantitative and qualitative data. This should include:
 - a. Number of pupils, staff, and parents reached with interventions (for example, number of staff who attended training, number of pupils who attended peer support sessions);
 - b. Staff and pupils' awareness of the support available;

- c. Pupil perception of school environment;
 - d. Pupil and staff wellbeing;
 - e. Staff confidence in addressing students' mental health needs;
 - f. Parental engagement and trust in school;
 - g. Number of school absences, including emotionally based school avoidances where possible;
 - h. Number of staff absences.
6. The Evaluation and Research Partner should also review resources developed by the programme provider over the course of the programme. This will include school self-assessments, school action plans, and any community of practice resources, the effectiveness and appropriateness of which should be assessed as part of the evaluation.
 7. The WSA programme will also have a specific focus on embedding an anti-racism approach and an understanding of how systemic discrimination impacts mental health in each school. The Evaluation and Research Partner should consider methods for evaluating the success of this approach.

Core capabilities of the Evaluation and Research Partner

1. To fulfil the role of Evaluation and Research Partner, the GLA is seeking a dynamic organisation staffed by people with excellent communication and people skills.
2. Essential criteria
 - a. Capacity, experience, and expertise to lead evaluation programmes that will incorporate a range of stakeholders and partners at strategic and operational levels;
 - b. Track record of high-quality research in adolescent mental health; peer-reviewed publications are desirable;
 - c. Knowledge of and experience working within the UK education landscape, including working with secondary schools;
 - d. Experience measuring the impact of education programmes and interventions;
 - e. Experience of and capacity to work on learning and evaluation projects across several sites simultaneously;
 - f. Experience of working with diverse groups of children and young people and their parents/carers;
 - g. Capacity to meet the stated timeframes through having a team of appropriately skilled, qualified, and resourced staff in place;
 - h. An understanding of public mental health;
 - i. Strong data analysis including quantitative and qualitative methods;
 - j. Strong data protection systems and processes;
 - k. Knowledge and experience of safeguarding children;
3. Desirable criteria
 - a) Experience evaluating a Whole School Approach programme.

Deliverables

1. Initially, the Evaluation and Research Partner will need to work with delivery partner and the GLA to refine and validate the Theory of Change for the overall programme. Then, the Evaluation and Research Partner will work with all the programme's stakeholders to deliver the following core pieces of work.
2. *Evaluating the whole school approach programme*
 - a. The Evaluation and Research Partner will work with Local Authorities, a locally appointed external delivery partner and the GLA, to refine and validate the Theories of Change and develop an evaluation framework.
 - b. The GLA understands that WSA programmes are complex, with schools working towards localised outcomes based on their specific context. However, the GLA is keen to understand a) key process learnings and b) the impact of the programme, at both school/local authority and programme level.
 - c. To that end, the Evaluation and Research Partner will employ appropriate methodologies to harness the key learning from the implementation and delivery of the programme and the Community of Practice that the programme provider develops. This will include ensuring the GLA understands whether the programme has been implemented as intended, further key process learning, and key challenges that have been identified.
 - d. Further, employing a mix of qualitative and quantitative measures, the Evaluation and Research Partner will be required to examine the impact of the programme. The highest priority for the impact element of the evaluation will be measuring systems change at the school and local authority levels.
 - e. The Evaluation and Research Partner will need to ensure that the programme monitoring strategy supports the finalised evaluation framework. All programme monitoring should, as far as possible, work with existing monitoring and case management systems to minimise the burden on delivery staff.
3. *Dissemination of evaluation findings and WSA online hub*
 - a. The Evaluation and Research Partner should aim for their evaluation to be of sufficient quality to allow for publication, both as a PDF on the GLA website and via submission to a peer-reviewed journal.
 - b. The Partner should take part in showcasing the findings from the evaluation for example through publications, resources, and webinars .

Milestones

Milestone	Due date	Description
1	October 2025	Finalise the Evaluation Framework, in agreement with the GLA and delivery partner. Refine and validate the Theory of Change and monitoring strategy
2	May 2026	Interim report of the evaluation
3	November 2027	Plan for final outputs including for peer-reviewed publication (e.g. article outline, target journal) as appropriate
4	March 2027	Final report, including any other outstanding outputs

1. The Evaluation and Research Partner will be expected to provide regular updates and monitoring to the GLA and meet with the GLA regularly, monthly initially, then on a quarterly basis over the course of the contract period. The Evaluation and Research Partner will also be a member of the project Implementation Group which will run for the first six months of the programme.

Payment

1. Payment is made upon successful completion of key milestones. NB: The below schedule is only indicative and subject to change following internal governance.
2. Payment 1 (20% of contract value): Upon delivery of milestone 1
3. Payment 2 (20% of contract value): Upon delivery of milestone 2
4. Payment 3 (20% of contract value): Upon delivery of milestone 3
5. Payment 3 (40% of contract value): Upon delivery of milestone 4