

MENTAL HEALTH & WELLBEING POLICY

Date	Review Date	Contact
01.09.18	01.09.19	Principal

1. Why mental health and wellbeing is important

At our school, we aim to promote positive mental health and wellbeing for our whole school community; pupils, staff, parents and carers, and recognise how important mental health and emotional wellbeing is to our lives in just the same way as physical health. We recognise that children's mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. All children go through ups and downs through their school career/life and some face significant life events. About 1 in 10 children aged 5 to 16 have a diagnosable mental health need and these can have an enormous impact on their quality of life, relationships and academic achievement. In many cases it is life-limiting.

The Department for Education (DfE) recognises that: "in order to help their pupils succeed; schools have a role to play in supporting them to be resilient and mentally healthy". Schools can be a place for children and young people to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience. For some, school will be a place of respite from difficult home lives and offer positive role models and relationships, which are critical in promoting pupils wellbeing and can help engender a sense of belonging and community.

Our role in school is to ensure that they are able to manage times of change and stress, be resilient, are supported to reach their potential and access help when they need it. We also have a role to ensure that pupils learn about what they can do to maintain positive mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues and where they can go if they need help and support.

Our aim is to help develop the protective factors which build resilience to mental health problems and be a school where

- All pupils are valued
- Pupils have a sense of belonging and feel safe
- Pupils feel able to talk openly with trusted adults about their problems without feeling any stigma
- Positive mental health is promoted and valued
- Bullying is not tolerated

In addition to children's wellbeing, we recognise the importance of promoting staff mental health and wellbeing.

2. Purpose of the policy

This policy sets out

- How we promote positive mental health
- How we prevent mental health problems
- How we identify and support pupils with mental health needs
- How we train and support all staff to understand mental health issues and spot early warning signs to help prevent mental health problems getting worse and support pupils
- Key information about some common mental health problems
- Where parents, staff and pupils can get advice and support

3. Definition of mental health and wellbeing

We use the World Health Organisation's definition of mental health and wellbeing
"a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community".

Mental health and wellbeing is not just the absence of mental health problems. We want all children/young people to

- feel confident in themselves
- be able to express a range of emotions appropriately
- be able to make and maintain positive relationships with others
- cope with the stresses of everyday life
- manage times of stress and be able to deal with change
- learn and achieve

4. How the policy was developed

In developing this policy we have taken account of

- Children and Young People's mental health: state of the nation 2016
- Education, Education, Education, Mental health 2016 (secondary)
- Promoting children and young people's emotional health and wellbeing Public Health England 2015
- Preparing to teach about mental health PSHE Association 2015
- Mental Health and Behaviour in schools DfE 2014
- Supporting pupils with medical conditions DfE 2014

5. Links to other policies

This policy links to our policies on safeguarding, behaviour management supporting pupils with medical conditions, anti-bullying, PSHE and SEND strategy. Links with the behaviour policy are especially important because behaviour, whether it is disruptive, withdrawn, anxious, depressed or otherwise, may be related to an unmet mental health need.

6. A whole school approach to promoting positive mental health

We take a whole school approach to promoting positive mental health that aims to help pupils become more resilient, be happy and successful and prevent problems before they arise.

This encompasses 7 aspects

1. Creating an ethos, policies and behaviours that support mental health and resilience that everyone understands
2. Helping pupils to develop social relationships, support each other and seek help when they need to
3. Helping pupils to be resilient learners
4. Teaching pupils social and emotional skills and an awareness of mental health
5. Early identification of pupils who have mental health needs and planning support to meet their needs, including working with specialist services
6. Effectively working with parents and carers
7. Supporting and training staff to develop their skills and resilience

We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues and aim to create an open and positive culture that encourages discussion and understanding of mental health issues.

7. Staff-their roles and responsibilities, including those with specific responsibility

We believe that all staff have a responsibility to promote positive mental health, and to understand about protective and risk factors for mental health. Some children will require additional help and all staff should have the skills to look out for any early warning signs of mental health problems and ensure that pupils with mental health needs get early intervention and the support they need.

All staff understand about possible risk factors that might make some children more likely to experience problems; such a physical long-term illness, having a parent who has a mental health problem, death and loss, including loss of friendships, family breakdown and bullying. They also understand the factors that protect children from adversity, such as self-esteem, communication and problem-solving skills, a sense of worth and belonging and emotional literacy (*see appendix 1 on risk and protective factors*).

Mental Health Lead (Principal)

Leads on and works with other staff to coordinate whole school activities to promote positive mental health

- Provides advice and support to staff and organises training and updates
- Keeps staff up to date with information about what support is available
- Liaises with the PSHE Coordinator on teaching about mental health
- Is the first point of contact and communicates with mental health services
- Leads on and makes referrals to services

We recognise that many behaviours and emotional problems can be supported within the school environment, or with advice from external professionals. Some children will need more intensive support at times, and there are a range of mental health professionals and organisations that provide support to pupils with mental health needs and their families. Support includes:

- Designated Safeguarding Leads
- SENDCO (Operations Lead) who helps staff understand their responsibilities to children with special educational needs and disabilities (SEND), including pupils whose mental health problems mean they need special educational provision.
- Our independent listener
- Psychotherapist from West Berks CAMHS who provides 1:1 therapy and group work to pupils who are referred and support staff to manage mental health needs of pupils-support can be offered in school or at an external agency

8. Supporting pupils' positive mental health

We believe we have a key role in promoting pupils positive mental health and helping to prevent mental health problems. Our school has developed a range of strategies and approaches including;

Pupil-led activities

- Campaigns and assemblies to raise awareness of mental health

Class activities

- Mindfulness sessions for pupils
- Mental health teaching programmes eg based on cognitive behavioural therapy

Whole school

- Wellbeing week
- Displays and information around the school about positive mental health and where to go for help and support both within the school and outside the school

We also take opportunities to investigate new evidence-based approaches eg Take Ten

Teaching about mental health and emotional wellbeing

Through PSHE we teach the knowledge and social and emotional skills that will help pupils to be more resilient, understand about mental health and help reduce the stigma of mental health problems.

Our pupils learn

- To recognise their personal strengths and how this affects their self-confidence and self-esteem
- To recognise that the way in which personal qualities, attitudes, skills and achievements are evaluated by others, affects confidence and self-esteem
- To accept helpful feedback or reject unhelpful criticism
- To understand that self-esteem can change with personal circumstances, such as those associated with family and friendships, achievements and employment
- What mental health is and types of mental health problems
- Strategies for promoting and managing mental health positively
- Healthy and unhealthy coping strategies
- To be resilient and manage failure positively
- How to deal with a breakdown in a relationship and the effects of change, including loss, separation, divorce and bereavement
- About the emotional aspects of relationships

- To recognise bullying and abuse in all its forms (including prejudice-based bullying both in person and online/via text, exploitation and trafficking) and to have the skills and strategies to manage being targeted or witnessing others being targeted
- To reduce and prevent the stigma of mental health
- The cause and symptoms of stress and managing stress, anxiety and depression
- Where to get help and support

9. Identifying, referring and supporting pupils with mental health needs

Our approach is to:

- Provide a safe environment to enable pupils to express themselves and be listened to
- Ensure the welfare and safety of pupils as paramount
- Identify appropriate support for pupils based on their needs
- Involve parents and carers when their child needs support
- Involve pupils in the care and support they have
- Monitor, review and evaluate the support with pupils and keep parents and carers updated

Early Identification

Our identification system involves a range of processes. We aim to identify children with mental health needs as early as possible to prevent things getting worse. We do this in different ways including:

- Analysing behaviour, exclusions, visits to the medical room, attendance and sanctions
- Staff report concerns about individual pupils to the Mental Health lead
- Gathering information from a previous school at transfer or transition
- Enabling pupils to raise concerns or self directly to the Mental Health lead or to any member of staff
- Enabling parents and carers to raise concerns directly to the Mental Health lead

All existing staff will have had Educare training by the end of 2018 on the protective and risk factors (see Appendix 1), types of mental health needs (see Appendix 2) and signs that might mean a pupil is experiencing mental health problems. Any member of staff concerned about a pupil will take this seriously and talk to the Mental Health Lead.

These signs might include:

- Isolation from friends and family and becoming socially withdrawn
- Changes in activity or mood or eating/sleeping habits
- Lowering academic achievement
- Talking or joking about self-harm or suicide
- Expressing feelings of failure, uselessness or loss of hope
- Secretive behaviour
- An increase in lateness or absenteeism
- Not wanting to do PE or get changed for PE
- Wearing long sleeves in hot weather
- Drugs or alcohol misuse
- Physical signs of harm that are repeated or appear non-accidental
- Repeated physical pain or nausea with no evident cause

Staff are aware that mental health needs such as anxiety might appear as non compliant, disruptive or aggressive behaviour which could include problems with attention or hyperactivity. This may be related to home problems, difficulties with learning, peer relationships or development.

If there is a concern that a pupil is in danger of immediate harm then the school's child protection procedures are followed. If there is a medical emergency then the school's procedures for medical emergencies are followed.

Disclosures by pupils and confidentiality

We recognise how important it is that staff are calm, supportive and non-judgemental to pupils who disclose a concern about themselves or a friend. The emotional and physical safety of pupils is paramount and staff listen rather than advise. Staff are clear to pupils that the concern will be shared with the Mental Health Lead and recorded in order to provide appropriate support to the pupil.

All disclosures are recorded and held on the pupil's confidential file, including date, name of pupil and member of staff to whom they disclosed, summary of the disclosure and next steps.

Assessment, Interventions and Support

All concerns are reported to the Mental Health Lead and recorded. We then implement our assessment system which is based on levels of need to ensure that pupils get the support they need, either from within the school or from an external specialist service. Our aim is to put in place interventions as early as possible to prevent problems escalating.

<p style="text-align: center;">Need</p> <p>The level of need is based on discussions at the regular Inclusion meetings/panel with key members of staff</p>	<p style="text-align: center;">Evidence-based Intervention and Support</p> <p>the kinds of intervention and support provided will be decided in consultation with key members of staff, parents and pupils <i>For example</i></p>	<p style="text-align: center;">Monitoring</p>
<p>Highest need</p>	<p>CAMHS-assessment, 1:1 or family support or treatment, consultation with school staff and other agencies School counsellor-1:1 support External agency support such as Place2be that provides 1:1 support and group work Other interventions eg art therapy</p> <p>If the school, professionals and/or parents conclude that a statutory education, health and care assessment is required, we refer to the SEND policy and SEN School Information Report.</p>	<p>All pupils needing targeted individualised support will have an Individual Care Plan drawn up setting out</p> <ul style="list-style-type: none"> ● The needs of the pupils ● How the pupil will be supported ● Actions to provide that support ● Any special requirements <p>Pupils and parents/carers will be involved in the plan. The plan and interventions are monitored, reviewed and evaluated to assess the impact and if needed a different kind of support can be provided.</p>
<p>Some need</p>	<p>Access to in school nurture group, family support worker, school nurse, art therapy, educational psychologist, 1:1</p>	

	intervention, small group intervention, skills for life/wellbeing programmes, circle of friends	The Care Plan is overseen by the Mental Health Lead
Low need	General support Eg member of staff	

Pupils are informed that the Mental Health Lead is available when a pupil is dissatisfied with the level of care and support.

Support for friends

We recognise that when a pupil is experiencing mental health problems it can be challenging for their friends, who often want to help them but are not sure the best thing to do and can also be emotionally affected. In the case of eating disorders and self harm, it is possible that friends may learn unhealthy coping strategies from each other, and we will consider on a case by case basis what support might be appropriate including one to one and group support.

We will involve the pupil who is suffering and their parents and consider what is helpful for friends to know and what they should not be told, how they can best support, things they should avoid doing/saying which may inadvertently cause upset and warning signs that their friend needs help

We will also make information available about where and how to access information and support for themselves and healthy ways of coping with the difficult emotions they may be feeling.

Support for pupils after inpatient treatment

We recognise that some pupils will need ongoing support and the Mental Health Lead will meet with pupils on a regular basis. We are careful not to “label” pupils.

We have a duty of care to support pupils and will seek advice from medical staff and mental health professionals on the best way to support pupils. We will carry out a risk assessment and produce a care plan to support pupils to re-integrate successfully back to school.

When a child leaves an inpatient provision and is transitioning back to school we discuss what needs to happen so the transition is smooth and positive

10. Working with specialist services to get swift access to the right specialist support and treatment

In some case a pupil’s mental health needs require support from a specialist service. These might include anxiety, depression, self-harm and eating disorders.

We have access to a range of specialist services and during the support will have regular contact with the service to review the support and consider next steps, as part of monitoring the pupils’ Individual Care Plan.

School referrals to a specialist service will be made by the Mental Health Lead following the assessment process and in consultation with the pupil and his/her parents and carers. Referrals will only go ahead with the consent of the pupil and parent/carer and when it is the most appropriate support for the pupil’s specific needs.

Specialist Service	Referral process
Child and Adolescent Mental Health Service (CAMHS)	Accessed through school, GP or self-referral
Educational Psychologist	Accessed through the Mental Health Lead

SEND and mental health

Persistent mental health problems may lead to pupils having significantly greater difficulty in learning, than the majority of those of the same age. In some cases the child may benefit from being identified as having a special educational need (SEN)

ii. Involving parents and carers

Promoting mental health

We recognise the important role parents and carers have in promoting and supporting the mental health and wellbeing of their children, and in particular supporting their children with mental health needs.

We ask parents to inform us of any mental health needs their child has and any issues that they think might have an impact on their child's mental health and wellbeing, based on a list of risk factors pertaining to the child or family (see appendix 1). It is very helpful if parents and carers can share information with the school so that we can better support their child.

Supporting parents and carers with children with mental health needs

We are aware that parents and carers react in different ways to knowing their child has a mental health problem and we will be sensitive and supportive. We also help to reassure by explaining that mental health problems are common, that the school has experience of working with similar issues and that help and advice are available.

When a concern has been raised the school will

- Contact parents and carers and if possible, meet with them

In most case parents and carers will be involved in their children's interventions, although there may be circumstances when this may not happen, such as child protection issues. Children over the age of 16 are entitled to consent to their own treatment.

- Offer information to take away and places to seek further information
- Be available for follow up calls
- Make a record of the meeting
- Agree an individual mental health care plan together with next steps
- Discuss how the parents and carers can support their child
- Keep parents and carers up to date and fully informed of decisions about the support and interventions

Parents and carers will always be informed if their child is at risk of danger and pupils may choose to tell their parents and carers themselves. We give pupils the option of informing their parents and carers about their mental health need for themselves or go along with them.

We make every effort to support parents and carers to access services where appropriate. Our primary concern are pupils, and in the rare event that parents and carers are not accessing services we will seek advice from the Local Authority. We also provide information for parents and carers to access support for their own mental health needs.

12. Involving pupils

We will seek pupil's views about our approach, curriculum and promoting whole school mental health activities.

We always seek feedback from pupils who have had support to help improve that support and the services they received.

13. Supporting and training staff

We want all staff to be confident in their knowledge of mental health and wellbeing and to be able to promote positive mental health and wellbeing, identify mental health needs early in pupils and know what to do and where to get help (see Appendix 3). All teaching and support staff will have completed appropriate Educare and in house training before the end of 2018 and have annual updates.

The Mental Health Lead will look to undertake a Mental Health First Aid two day training course in 2018 and where possible have access to supervision from mental health professionals.

Supporting and promoting the mental health and wellbeing of staff is an essential component of a healthy school and we promote opportunities to maintain a healthy work life balance and wellbeing, such as yoga, mindfulness, and physical activities.

14. Monitoring and Evaluation

The mental health and wellbeing policy is on the school website and hard copies are available to parents and carers from the school office. All mental health professionals are given a copy before they begin working with the school as well as external agencies involved in our mental health work.

The policy is monitored at an annual review meeting led by the Mental Health Lead and involves staff with a responsibility for mental health, including specialist services supporting the school and Proprietor.

Appendix 1 Protective and Risk factors (adapted from Mental Health and Behaviour DfE March 2016)

	Risk Factors	Protective Factors
In the Child	<ul style="list-style-type: none">● Genetic influences● Specific development delay● Communication difficulties● Physical illness● Academic failure● Low self-esteem● SEND	<ul style="list-style-type: none">● Being female (in younger children)● Secure attachment experience● Outgoing temperament as an infant● Good communication skills, sociability● Being a planner and having a belief in control● Humour● Problem solving skills and a positive attitude

		<ul style="list-style-type: none"> ● Experiences of success and achievement ● Faith or spirituality ● Capacity to reflect
In the Family	<ul style="list-style-type: none"> ● Overt parental conflict including domestic violence ● Family breakdown (including where children are taken into care or adopted) ● Inconsistent or unclear discipline ● Hostile and rejecting relationships ● Failure to adapt to a child's changing needs ● Physical, sexual, emotional abuse or neglect ● Parental psychiatric illness ● Parental criminality, alcoholism or personality disorder ● Death and loss – including loss of friendship 	<ul style="list-style-type: none"> ● At least one good parent-child relationship (or one supportive adult) ● Affection ● Clear, consistent discipline ● Support for education ● Supportive long term relationship or the absence of severe discord
In the School	<ul style="list-style-type: none"> ● Bullying ● Discrimination ● Breakdown in or lack of positive friendships ● Negative peer influences ● Peer pressure ● Poor pupil to teacher relationships 	<ul style="list-style-type: none"> ● Clear policies on behaviour and bullying ● 'Open door' policy for children to raise problems ● A whole-school approach to promoting good mental health ● Positive classroom management ● A sense of belonging ● Positive peer influences
In the Community	<ul style="list-style-type: none"> ● Socio-economic disadvantage ● Homelessness ● Disaster, accidents, war or other overwhelming events ● Discrimination ● Other significant life events 	<ul style="list-style-type: none"> ● Wider supportive network ● Good housing ● High standard of living ● High morale school with positive policies for behaviour, attitudes and anti-bullying ● Opportunities for valued social roles ● Range of sport/leisure activities

Appendix 2 Specific mental health needs most commonly seen in school-aged children

For information see Annex C Main Types of Mental Health Needs

Mental Health and Behaviour in School DfE March 2016

<https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2>

Annex C includes definitions, signs and symptoms and suggested interventions for

- Anxiety (including panic attacks, phobias and Obsessive Compulsive Disorder OCD)
- Depression
- Eating Disorders
- Substance Misuse
- Self Harm

The DfE guide does not include specific information on suicidal thought

Suicidal Thoughts

Young people may experience thoughts and feelings about wanting to end their lives. Some young people never act on these feelings but may openly discuss and explore them, while other young people die suddenly from suicide without any apparent warning signs.

Appendix 3 Where to get information and support

For support on specific mental health needs

Anxiety UK www.anxietyuk.org.uk OCD UK www.ocduk.org

Depression Alliance www.depressoinalliance.org

Eating Disorders www.b-eat.co.uk and www.inourhands.com

National Self-Harm Network www.nshn.co.uk

www.selfharm.co.uk

Suicidal thoughts [Prevention of young suicide UK – POPYRUS: www.papyrus-uk.org](http://www.papyrus-uk.org)

For general information and support

www.youngminds.org.uk champions young people's mental health and wellbeing

www.mind.org.uk advice and support on mental health problems

www.minded.org.uk (e-learning)

www.time-to-change.org.uk tackles the stigma of mental health

www.rethink.org challenges attitudes towards mental health