# Mental Health and Well-Being Policy

**Written: January 2023**

**Agreed by Governors on: 8/2/23**

**To Be Reviewed: July 2023 then every 3 years thereafter**

*Loving all, like Jesus, we flourish together*

# 1. Why Mental Health and Well-Being is Important

At our school, in order to enable our whole community to 'flourish' in line with our Mission Slogan, we aim to promote positive mental health and well-being for our whole school community; pupils, staff, parents and carers, and recognise how important mental health and emotional well-being 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. Persistent mental health problems may lead to pupils having significantly greater difficulty in learning than the majority of those of the same age.

The Special Educational Needs and Disabilities (SEND) Code of Practice identifies Social, Emotional and Mental Health as one of the four areas of Special Educational Need.

All children go through ups and downs through their school career and some face significant life events. About 10% of 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.

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 well-being 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 well-being, we recognise the importance of promoting staff mental health and well-being.

## 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
- key information about some common mental health problems
- where parents, staff and pupils can get advice and support

## 3. Definition of Mental Health and Well-Being

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 well-being 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. Links to other Policies

This policy links to our policies on Safeguarding; Behaviour; Human Relationships and Sex Education (HRSE); and Special Educational Needs and Disabilities (SEND).

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. We consider ***behaviour to be a message***.

## 5. 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 seven 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. We aim to be a 'talking school' with an 'Open Door Policy'.

## 6. Roles and Responsibilities

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 there is a range of possible risk factors that might make some children more likely to experience problems; such as being exposed to Adverse Childhood Experiences and trauma; 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 and 2 for further information.

The school's Mental Health Team *(which includes our Senior Mental Health Lead and Mental Health First Aiders as well as our School Counsellor, SENDCO and Designated Safeguarding Team):*

- 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 HRSE Leader 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:

- In-house School Counsellor
- Children and Family Wellbeing (CFW) and Children's Social Care services (CSC)
- Safeguarding Team
- All staff to manage mental health needs of pupils
- SENDCO 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.
- School nurse / family doctors and medical professionals
- Children and Adult Mental Health Services (CAMHS)
- Educational Psychologist support
- Mental Health First Aiders
- Lancashire Inclusion Team

## 7. 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*

- Wellbeing Champions
- School Council
- Awareness and Fundraising activities (e.g. Hello Yellow Day)

*Class Activities*

- Worry jars
- Mindfulness and breathing/meditation in class
- Weekly Examen reflection time
- Social Groups
- Safe Space outside of class
- Calming techniques
- Growth Mindset

*Whole School*

- Mission Statement founded on 'Loving all, like Jesus, we flourish together'
- Focus on our Seven Skills of the Steward in line with our Curriculum Intent (especially resilience; problem-solving; empathy; team-working; gratitude; peace-making)
- Assembly themes
- Chosen Adult initiative
- Restorative Solutions practices as part of Behaviour Policy
- Behaviour Policy that aims to set children up to succeed
- 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
- 1:1 and group counselling
- Daily drop-ins with Mental Health First Aider
- Friendship Week
- British Values focus

**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

## 8. 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:

- Identify individuals that might need support (e.g. all staff to flag verbally and/or via CPOMS on a wide range of areas that affect mental health)
- home visits in EYFS to identify needs
- analysing behaviour, exclusions and attendance trends
- using PIVOTS to track children identified as having difficulties
- pupil surveys at the beginning and end of the school year
- worry jars in each class for pupils to raise concerns which are checked by the class teacher
- weekly staff briefing for staff to raise concerns about individual children where necessary
- weekly SLT reviews of children across the school
- half termly reviews of children accessing counselling support and those who have Individualised Learning Plans, Behaviour Support Plans or Risk Assessments in place
- gathering information from a previous school at transfer or transition
- parental meetings
- enabling pupils to raise concerns to class teacher and support staff, e.g. through Chosen Adult initiative
- enabling parents and carers to raise concerns through the school class teacher or to any member of staff - we have an 'Open Door Policy' with 'on the gate' communication as well as utilising Class Dojo messaging and contact with school office
- drop-ins with School Nurse
- liaising with Children Family Wellbeing monthly to discuss identified children

Signs of children possibly needing extra mental health support might include:

- non-verbal behaviour
- 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
- an increase in lateness or absenteeism
- not wanting to do PE or get changed for PE
- drug or alcohol misuse
- physical signs of harm that are repeated or appear non-accidental
- wearing long sleeves in hot weather
- 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. A risk assessment and plan will be made.

**Verbal Disclosures by Pupils**

We recognise how important it is that staff are calm, supportive and non-judgmental to pupils who verbally 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 Inclusion Manager/Designated Safeguarding Team and recorded in order to provide appropriate support to the pupil.

**Non-Verbal Disclosures by Pupils**

Staff also recognise persistent and unusual non-verbal disclosures in behaviours in line with the NICE (National Institute for Health & Care Excellence) recommendation that behaviour may be an unmet need or message.

**Confidentiality**

All disclosures are recorded and held on the pupil's confidential CPOMs record, 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 Designated Safeguarding Team and recorded. We then implement our assessment system 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.

We recognise that just like physical health, mental health and emotional well-being can vary at any given time and is fluid and changes, there are no absolutes.

## 9. 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, school refusal and other complex needs.

We make links with a range of specialist services and have regular contact with the services to review the support and consider next steps, as part of monitoring the pupils' provision.

School referrals to a specialist service will be made by the Safeguarding Team, SENDCO or School Counsellor 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 parent/carer and when it is the most appropriate support for the pupil's specific needs.

Such outside agencies might include:

- Children and Family Wellbeing (CFW) and Children's Social Care services (CSC)
- Lancashire Safeguarding Team
- School nurse / family doctors and medical professionals
- Children and Adolescent Mental Health Services (CAMHS)
- Educational Psychologist support
- Lancashire Inclusion Team
- Lancashire SEND Team
- Related charities such as Child Action North West

## 10. 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.

**To support parents and carers:**

- 'front of house' friendly and supportive welcome
- 'open door' and 'on the gate' policy enabling good lines of communication between home and school
- we provide information and signposting to organisations on our websites on mental health issues and local wellbeing and parenting programmes.

- supporting parents and carers with children with mental health needs through sensitive and supportive regular meetings, e.g. facilitating sessions between parents and children to help resolve / share issues
- signposting parents to a range of outside agencies, charities and sources of helpful information

**When a concern has been raised the school will:**

- contact parents and carers and 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.
- offer information to take away and places to seek further information
- be available for follow up calls
- make a record of the meeting on CPOMS
- agree an Action Plan if necessary
- 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.

We make every effort to support parents and carers to access services where appropriate. Pupils are our primary concern, 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.

## 11. Involving Pupils

- we seek pupils' views and feedback about our approach and whole school mental health activities through Pupil Voice, twice-annual surveys, School Council meetings and suggestion boxes
- we have a small group of year six pupils on our Wellbeing Champions group who are on hand on the playground to spot and begin the supportive process for their peers if they appear to be struggling in any way (and pass on where appropriate)
- pupil involvement in events and activities that support and promote mental health and relevant organisations

## 12. 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).

Those staff with a specific responsibility have more specialised training and where possible access to supervision from mental health professionals.

Staff training to raise awareness of Mental Health and emotional well-being topics have been accessed through Compassionate Culture training; annual safeguarding training and half-termly training relating to areas which affect mental health, e.g. attachment and trauma (usually facilitated by our School Counsellor or one of our Designated Safeguarding Leads).

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 with things such as: 'Thirsty Thursday' weekly brew and a chat before school mornings; wellbeing walks; staff voice; outside of school social activities; displays promoting positive mental health and where to get support; ensuring the working environment is as comfortable as possible. We also have an annual Mental Health and Wellbeing audit and action plan to help further-enhance this area.

All teaching staff have access to regular supervision in a variety of forms, with other staff supported similarly should the need arise (e.g. with informal drop-ins with our School Counsellor).

## 13. Monitoring and Evaluation

This policy was made in collaboration with the whole school. Its effectiveness will be monitored by the SLT and reported to the Resources Committee. This policy will be reviewed every three years or sooner if deemed necessary.

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

| | **Risk Factors** | **Protective Factors** |
|---|---|---|
| In the Child | • Genetic influences<br>• Specific development delay<br>• Communication difficulties<br>• Physical illness<br>• Academic failure<br>• Low self-esteem<br>• SEND | • Being female (in younger children)<br>• Secure attachment experience<br>• Outgoing temperament as an infant<br>• Good communication skills, sociability<br>• Being a planner and having a belief in control<br>• Humour<br>• Problem solving skills and a positive attitude<br>• Experiences of success and achievement<br>• Faith or spirituality<br>Capacity to reflect |
| In the Family | • Overt parental conflict including domestic violence<br>• Family breakdown (including where children are taken into care or adopted)<br>• Inconsistent or unclear discipline<br>• Hostile and rejecting relationships<br>• Failure to adapt to a child's changing needs<br>• Physical, sexual, emotional abuse or neglect<br>• Parental psychiatric illness<br>• Parental criminality, alcoholism or personality disorder<br>• Death and loss – including loss of friendship | • At least one good parent-child relationship (or one supportive adult)<br>• Affection<br>• Clear, consistent discipline<br>• Support for education<br>• Supportive long term relationship or the absence of severe discord |
| In the School | • Bullying<br>• Discrimination<br>• Breakdown in or lack of positive friendships<br>• Negative peer influences<br>• Peer pressure<br>• Poor pupil to teacher relationships | • Clear policies on behaviour and bullying<br>• 'Open door' policy for children to raise problems<br>• A whole-school approach to promoting good mental health<br>• Positive classroom management<br>• A sense of belonging<br>• Positive peer influences |

| | | |
|---|---|---|
| In the Community | • Socio-economic disadvantage<br>• Homelessness<br>• Disaster, accidents, war or other overwhelming events<br>• Discrimination<br>• Other significant life events | • Wider supportive network<br>• Good housing<br>• High standard of living<br>• High morale school with positive policies for behaviour, attitudes and anti-bullying<br>• Opportunities for valued social roles<br>• 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-inschools--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
Self-Harm www.selfharm.co.uk
Suicidal thoughts Prevention of young suicide UK – PAPYRUS: 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 https://www.annafreud.org/ for a wide range of information relating to mental health and wellbeing