

# Mental Health Policy

Positive Mental Health Policy

### Policy Statement

"Mental health is 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." (World Health Organization)

At our school, we aim to promote positive mental health for every member of our staff and student body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable students. In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for students affected both directly, and indirectly by mental ill health.

### Scope

This document describes the school's approach to promoting positive mental health and wellbeing. This policy is intended as guidance for all staff including non-teaching staff and governors.

- . The Policy Aims to:
- Promote positive mental health in all staff and students
- Increase understanding and awareness of common mental health issues
- Alert staff to early warning signs of mental ill health
- Provide support to staff working with young people with mental health issues
- Provide support to students suffering mental ill health and their peers and parents/carers
- Provide support to staff to manage their own and colleague's well-being.

### Lead Members of Staff

Whilst all staff have a responsibility to promote the mental health of students. Staff with a specific, relevant remit include:

- Designated Safeguarding Lead: Kirsten Pankhurst
- Link Governor for safeguarding: Dr Nicky Thorp
- Head of Personal, Social and Health Education: Michael Turner
- School Nurse: Debbie Cox
- Special Educational Needs Co-ordinator: Jenny Williams

Any member of staff who is concerned about the mental health or wellbeing of a student should speak to the Head of Year lead in the first instance. If there is a fear that the student is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the DSL. If the student presents a medical emergency then the normal procedures for medical emergencies should be followed, including alerting the first aid staff and contacting the emergency services if necessary. Where a referral to the Child & Adolescent Mental Health Services (CAMHS) is appropriate, this will be led and managed by the DSL and School Nurse.

#### Individual Care Plans

It is helpful to draw up an individual care plan for students causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the student, the parents and relevant health professionals. This can include:

- Details of a student's condition
- Special requirements and precaution
- Medication and any side effects
- What to do, and who to contact in an emergency
- The role the school can play

### Teaching about Mental Health

The skills, knowledge and understanding needed by our students to keep themselves and others physically and mentally healthy and safe are included as part of our developmental personal, social and health education (PSHE) curriculum.

The specific content of lessons will be determined by the specific needs of the cohort being taught but there will always be an emphasis on enabling students to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others. We will follow the PSHE Association Guidance along with Think You Know and Young Minds guidance to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner.

### Signposting

We will ensure that staff, students and parents are aware of sources of support within school and in the local community. What support is available within our school and local community, who it is aimed at and how to access it is outlined in Appendix B. We will display relevant sources of support in communal areas such as common rooms and toilets and will regularly highlight sources of support to staff in the staffroom and to students within relevant parts of the curriculum. The School Nurse sends out regular support information to staff and parents via email.

Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring students understand:

- What help is available
- Who it is aimed at
- How to access it
- Why to access it
- What is likely to happen next

## Warning Signs

School staff may become aware of warning signs which indicate a student is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with the Head of Year and School Nurse via My Concern. My Concern will also highlight this to the Special Educational Needs Co-ordinator (SENCO) and the Designated Safeguarding Lead.

Possible warning signs include:

- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating / sleeping habits
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood
- Declining academic achievement
- Talking or joking about self-harm or suicide
- Abusing drugs or alcohol
- Expressing feelings of failure, uselessness or loss of hope
- Changes in clothing e.g. long sleeves in warm weather
- Secretive behaviour

- Skipping PE or getting changed secretively
- · Lateness to or absence from school
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

### Managing disclosures

### Disclosures by students and confidentiality

We recognise how important it is that staff are calm, supportive and non-judgmental to students who disclose a concern about themselves or a friend. The emotional and physical safety of students is paramount and staff should listen rather than advise. Staff are clear to students that the concern will be shared with the DSL, and recorded in order to provide appropriate support to the student. All disclosures are recorded and held on the student's confidential file, including date, name of student and member of staff to whom they disclosed, summary of the disclosure and next steps. All disclosures will be managed in accordance with the school's Child Protection and Safeguarding Policy.

## Working with Parents

Where it is deemed appropriate to inform parents, we need to be sensitive in our approach. Before disclosing to parents we should consider the following questions (on a case by case basis):

- Can the meeting happen face to face? This is preferable.
- Where should the meeting happen? At school, at their home or somewhere neutral?
- Who should be present? Consider parents, the student, other members of staff.
- What are the aims of the meeting?

It can be shocking and upsetting for parents to learn of their child's issues and many may respond with anger, fear or upset during the first conversation. We should be accepting of this (within reason) and give the parent time to reflect. We should always highlight further sources of information and give them leaflets to take away where possible as they will often find it hard to take much in whilst coming to terms with the news that is being shared. Sharing sources of further support aimed specifically at parents can also be helpful too e.g. parent helplines and forums. We should always provide clear means of contacting us with further questions and consider booking in a follow up meeting or phone call right away as parents often have many questions as they process the information.

Finish each meeting with agreed next step and always keep a brief record of the meeting on the child's confidential record.

### Working with All Parents

Parents are often very welcoming of support and information from the school about supporting their children's emotional and mental health. In order to support parents we will:

• Highlight sources of information and support about common mental health issues on our school website – Think you know, MindEd, NSPCC, Young minds, Childline

- Parents/carers/staff may also require specific relevant support information regarding self-harm, eating disorders, psychosis, anxiety, depression and more. The DSL and School Nurse can signpost individuals further when necessary. Some of these sources are included in Appendix C
- Ensure that all parents are aware of who to talk to, and how to go about this, if they have concerns about their own child or a friend of their child
- Make our mental health policy easily accessible to parents
- Share ideas about how parents can support positive mental health in their children through planned information evenings
- Keep parents informed about the mental health topics their children are learning about in PSHE and share ideas for extending and exploring this learning at home

## **Supporting Peers**

When a student is suffering from mental health issues, it can be a difficult time for their friends. Friends often want to support but do not know how. The school operates a Peer Mentor system with 'big brothers/sisters' to help support peers when deemed suitable.

In the case of self-harm or eating disorders, it is possible that friends may learn unhealthy coping mechanisms from each other. In order to keep peers safe, we will consider on a case by case basis which friends may need additional support. Support will be provided either in one to one or group settings and will be guided by conversations by the student who is suffering and their parents with whom we will discuss:

- What it is helpful for friends to know and what they should not be told
- How friends can best support
- Things friends should avoid doing / saying which may inadvertently cause upset
- Warning signs that their friend may need help (e.g. signs of relapse)

Additionally, we will want to highlight with peers:

- Where and how to access support for themselves
- Safe sources of further information about their friend's condition
- Healthy ways of coping with the difficult emotions they may be feeling

### **Training**

All staff will receive regular training about recognising and responding to mental health issues as part of their regular child protection training in order to enable them to keep students safe. Training opportunities for staff who require more in depth knowledge will be considered as part of our performance management process and additional continuing professional development will be supported throughout the year where it becomes appropriate due to developing situations with one or more students. This includes training staff in Mental Health First Aid on an annual basis.

# Monitoring & Review

Monitoring of mental health issues and policy implementation will be via:

- Continuing professional development (CPD) sessions delivered to staff relating to mental health
- Personal, Social and Health Education (PSHE) topics relating to mental health
- An annual report to Governors of the number of MyConcern logs and referrals to the Child & Adolescent Mental Health Services
- An annual review of mental health at the Student Committee

### Appendix A:

Guidance and advice documents

Supporting mental health in schools and colleges – GOV.UK

Surveys and case studies with schools on activities to support students' mental health and wellbeing (2017)

Mental health and behaviour in schools - departmental advice for school staff. Department for Education (2014)

<u>Counselling in schools: a blueprint for the future</u> - departmental advice for school staff and counsellors. Department for Education (2015)

<u>Teacher Guidance: Preparing to teach about mental health and emotional wellbeing</u> (2015). PSHE Association. Funded by the Department for Education (2015)

<u>Keeping children safe in education</u> - statutory guidance for schools and colleges. Department for Education (2021)

<u>Healthy child programme from 5 to 19 years old</u> is a recommended framework of universal and progressive services for children and young people to promote optimal health and wellbeing. Department of Health (2009)

<u>Future in mind</u> – promoting, protecting and improving our children and young people's mental health and wellbeing - a report produced by the Children and Young People's Mental Health and Wellbeing Taskforce to examine how to improve mental health services for children and young people. Department of Health (2015)

What works in promoting social and emotional wellbeing and responding to mental health problems in schools? Advice for schools and framework document written by Professor Katherine Weare. National Children's Bureau (2015)

#### **Data Sources**

Children and young people's mental health and wellbeing profiling tool collates and analyses a wide range of publically available data on risk, prevalence and detail (including cost data) on those services that support children with, or vulnerable to, mental illness. It enables benchmarking of data between areas.

ChiMat school health hub provides access to resources relating to the commissioning and delivery of health services for school children and young people and its associated good practice, including the new service offer for school nursing 22.

Kirsten Pankhurst 3<sup>rd</sup> September 2024. To be reviewed September 2025