

# Holistic Mental Health and Wellbeing Policy

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**Review Date 1: Jan 2019**

**Review Date 2: Jun 2020**

**Review Date 3: Jun 2021**

**Review Date 4: Jun 2022**

## Overview/Background/Rationale

*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)*

In an average classroom in a Mainstream School, three children will be suffering from a diagnosable mental health issue.

Our school complies with the Children's Act and we promote and endeavour to improve in conjunction with our ethos and curriculum, our students:

- (a) physical and mental health and emotional well-being;
- (b) protection from harm and neglect;
- (c) education, training and recreation;
- (d) the contribution made by them to society;
- (e) social and economic well-being.

## Scope

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

This policy should be read in conjunction with the Safeguarding policy:

## Aims

At our school we aim to promote positive mental health for every member of our school community. We use universal, whole school **and** specialised, targeted approaches aimed at vulnerable children. Within the appendix you will find specific resources to support staff, children and parents individually.

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 families affected both directly, and indirectly by mental ill health.

- Promote positive mental health in all
- 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, their peers and parents/carers

### **Lead Members of Staff**

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

- E Shutt - Designated Safeguarding Lead
- E Shutt - Mental Health Lead
- E Shutt- Lead First Aider
- C Hammond - Pastoral Lead
- E Shutt - CPD Lead
- E Shutt – Early Help Champion

Any member of staff who is concerned about the mental health or wellbeing of a student or parent should speak to the mental health lead in the first instance. If there is a fear that the person is in danger of immediate harm, then the normal child/adult protection procedures should be followed with an immediate referral to the designated office or the service Director. If the person 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. (remember to remain calm and make notes as the event unfolds)

Where a referral to CAMHS is appropriate, this will be led and managed by the Director.

### **Holistic Care and Curriculum Plans**

It is helpful to draw up Curriculum focussed Pupil Support Plans and Holistic Care Plans for all pupils. These are written with involvement from the pupil, the parents and relevant health professionals and acknowledged.

They can include:

- Details of a pupil's condition
- Special requirements and precautions
- 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 Holistic curriculum and parent training.

The specific content of lessons will be determined by the specific needs of the cohort we're teaching 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 follow the [PSHE Association Guidance](#)<sup>1</sup> and Family Links programme to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

Staff will have access to evidence-based training, assessment and support programmes and information with regards to improving mental health and well being.

including:

- Bespoke initial assessment/ information gathering
- Boxall profiling
- Strengths and Difficulties Questionnaires
- South Hampton Emotional Literacy Programme
- Family Links parent training and emotional health programme
- Early Help
- Friends for Life
- Stop Think Do
- Clinical Supervision
- Prevent
- Attachment
- SEND

## Signposting

We will ensure that staff, students and parents are aware of sources of support within school and in the local community. The support 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 and will regularly highlight sources of support to students within relevant parts of the curriculum. 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

Staff may become aware of warning signs which indicate a person 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 Director.

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
- Lowering of 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 secretly
- Lateness to or absence
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

## Managing disclosures

A Child/Parent may choose to disclose concerns about themselves or a friend to any member of staff, so all staff need to know how to respond appropriately to a disclosure.

If a person chooses to disclose concerns about their own mental health or that of a friend to a member of staff, the member of staff's response should **always be calm, supportive and non-judgemental.**

Staff **should listen, rather than advise and our first thoughts should be of the person's emotional and physical safety rather than of exploring 'Why?'** For more information about how to handle mental health disclosures sensitively see appendix E.

All disclosures should be recorded in writing and held on the student's confidential file. This record should include:

- Date
- The name of the member of staff to whom the disclosure was made
- Main points from the conversation
- Agreed next steps

This information should be shared with the Director who will store the record appropriately and offer support and advice about next steps. See Appendix F for guidance about making a referral to CAMHS.

## Confidentiality

We should be honest with regards to the issue of confidentiality. If it is necessary for us to pass our concerns on, then we should discuss the following points with the person:

- Who we are going to talk to
- What we are going to tell them
- Why we need to tell them

We should never share information about a person without first telling them. Ideally, we would receive their consent, though there are certain situations when information must always be shared with another member of staff and / or a parent, especially if the young person at risk of harming themselves is under 16.

It is always advisable to share disclosures with a colleague, {preferably the Director} this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the person, it ensures continuity of care in our absence and it provides an extra source of ideas and support. We should explain this to the student and discuss with them who it would be most appropriate and helpful to share this information with.

Parents/ Carers must always be informed if a student tries to harm themselves or others though students may choose to share with their parents themselves. If this is the case, the student should be given 24 hours to share this information before the school contacts parents. We should always give students the option of School informing parents for them or with them.

If a child gives us reason to believe that there may be underlying Child Protection issues, parents should not be informed, but CHAD {Stoke on Trent students} must be informed immediately.

## **Working with Parents/Carers**

Where it is deemed appropriate to inform parents/carers, 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, somewhere neutral}
- Who should be present? {Insider parents, the student, other members of staff}
- What are the aims of the meeting?

It can be shocking and upsetting for parents/carers 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/carer time to reflect.

We 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 you're sharing. 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 steps 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
- Ensure that all parents are aware of who to talk to, and how to get 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 our regular 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 person 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. 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 needs 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

As a minimum, 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.

We will host relevant information on our virtual learning environment for staff who wish to learn more about mental health. The [MindEd learning portal](#)<sup>2</sup> provides free online training suitable for staff wishing to know more about a specific issue.

Training opportunities for staff who require more in-depth knowledge will be considered as part of our performance management process and additional CPD will be supported throughout the year where it becomes appropriate due developing situations with one or more students.

Where the need to do so becomes evident, we will host twilight training sessions for all staff to promote learning or understanding about specific issues related to mental health.

Suggestions for individual, group or whole school CPD should be discussed with **E Shutt, our CPD Coordinator** who can also highlight sources of relevant training and support for individuals as needed.