

Forest Academy



Mental Health and wellbeing Policy

Date Completed: February 2020

Completed by: April Grimes

Review Date: February 2023

Signed:

Chair of Governors: Claire Goldstone

Mental Health and Wellbeing Policy

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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)

In our school our vision shapes all we do:



In addition we aim to promote positive mental health for every member of our staff and children. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable children.

In addition to promoting positive mental health and wellbeing, we aim to recognise and respond to need as it arises. By developing and implementing practical, relevant and effective mental health and wellbeing policies and procedures we can promote a safe and stable environment for children affected both directly and indirectly by mental health and wellbeing issues.

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.

This policy should be read in conjunction with our medical policy in cases where a child's mental health and wellbeing overlaps with or is linked to a medical issue and the SEND policy where a child has an identified special educational need.

The policy aims to:

- Promote positive mental health and wellbeing in all staff and pupils
- Increase understanding and awareness of common mental health issues
- Alert staff to early warning signs of poor mental health and wellbeing
- Provide support to staff working with young people with mental health and wellbeing issues
- Provide support to children suffering mental ill health and their peers and parents/carers

Lead Members of Staff

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

- Lorna Rourke/April Grimes - Designated Senior Lead (DSL)
- Zoe Huff/ Sam Gough – Alternate (ADL)
- Tammy Wright – Safeguarding and welfare officer/Pastoral/ Mental Health and Emotional Wellbeing Lead, Mental Health First Aider
- Zoe Huff - SENDCo
- Eliza Hopkinson - Head of PSHE
- Claire Edmeades – Medical Lead
- Linda Sacks- First Aid Lead
- Julie Noakes/Emma Gould-ELSA

Any member of staff who is concerned about the mental health or wellbeing of a child should speak to the DSL or Mental Health Lead in the first instance. If there is a fear that the child is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the DSL. If the child 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 CAMHS is appropriate, this will be led and managed by Tammy Wright. Guidance about referring to CAMHS is provided in Appendix 1 -Forest Behaviour & Mental Health Process Identification

The school has employed a counsellor to support children's well-being and mental health.

Individual Care Plans

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

- Details of a child'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 and Wellbeing

The skills, knowledge and understanding needed by our children to keep themselves and others physically and mentally healthy and safe are included as part of our developmental PSHE curriculum.

The specific content of lessons will be determined by the specific needs of the cohort we are teaching but there will always be an emphasis on enabling children to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

We will follow the PSHE Guidance¹ to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

The school also follows statutory Relationships Education, Relationships and Sex Education (RSE) and Health Education (2020). The named RSHE governor is Jo Wilson.

The school will also deliver a 'Wellbeing week' each academic year, focusing on mental health, healthy lifestyles, self- image and positive mind set. Furthermore, the curriculum is supplemented by specialist providers: regular work with One Life, the Art of Brilliance, Forest Schools, Wild Play (outdoor learning).

Signposting

We will ensure that staff, children 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 our early help offer which can be found on our school website and is given to all staff at induction. The school's 'Early Help' offer is communicated to parents on the website and through displays around the school.

We also display other relevant sources of support in communal areas and toilets and will regularly highlight sources of support to children within relevant parts of the curriculum. We recognise the need to talk frequently about the help we can offer and this is planned into special assemblies. Whenever we highlight sources of support, we will increase the chance of children help-seeking by ensuring children understand:

- Who they might like to speak with in school
- 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 child 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 April Grimes/ Lorna Rourke. All teaching

¹ Teacher Guidance: Preparing to teach about mental health and emotional wellbeing URL= <https://www.pshe-association.org.uk/curriculum-and-resources/resources/guidance-preparing-teach-about-mental-health-and> (accessed 02.02.2018)

staff enter any incidents or concerns onto CPOMS which helps to build a chronological picture and alerts key staff to take appropriate action.

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 from school
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism
- Emotional hi-jacks

Managing disclosures

A child 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 child 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 to advise, and our first thoughts should be of the pupil's emotional and physical safety rather than of exploring 'Why?' For more information about how to handle mental health disclosures sensitively see the school's safeguarding policy.

All disclosures are recorded on CPOMS and held on the pupil's confidential file. This written 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 is shared with the Designated Senior Lead and Mental health lead, who will store the record appropriately and offer support and advice about next steps. This may include the SENDCo if appropriate.

Confidentiality

We should be honest with regards to the issue of confidentiality. If we feel it is necessary for us to pass our concerns about a child on then we should discuss with the child:

- 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 child 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, **particularly if a child is in danger of harm.**

It is always advisable to share disclosures with the DSL and/or the Mental Health and Emotional Wellbeing Lead, this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the child, it ensures continuity of care in our absence and it provides an extra source of ideas and support. We should explain this to the child and discuss with them who it would be most appropriate and helpful to share this information with.

Parents should be informed if there are concerns about a child's mental health and wellbeing and older children may choose to tell their parents themselves. If this is the case, the child should be given 24 hours to share this information before the school contacts parents. We should always give children the option of us informing parents for them or with them. For primary aged children, we feel it is important to inform parents as soon as possible and we would decide on an individual basis whether it is appropriate to include the child in the conversation.

If a child gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but the DSL must be informed immediately.

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 child, and 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 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 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 wellbeing 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 child 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 child 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 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 pupils safe.

The MindEd learning portal provides free online training suitable for staff wishing to know more about a specific issue.²

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 pupils.

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 Lorna Rourke/April Grimes, who can also highlight sources of relevant training and support for individuals as needed.

Staff well-being

The school buys into the Schools Choice HR service, which provides well-being guidance and stress management tools.

The Governors and senior leaders conduct regular well-being surveys. These are evaluated and action taken where appropriate.

Senior leaders are mindful of workload and this is a regular discussion point in morning briefing. Head teachers monitor staff work load and liaise closely with staff to ensure the expectation is manageable.

Policy Review

This policy will be reviewed every 3 years as a minimum. It is next due for review in February 2023

Additionally, this policy will be reviewed and updated as appropriate on an ad hoc basis.

This policy will always be immediately updated to reflect personnel changes.

² www.minded.org.uk [accessed 02/02/18].

Appendix 1-Forest Behaviour & Mental Health Process

Identification				
<u>Change in Behaviour:</u> <ul style="list-style-type: none">➤ Withdrawn➤ Isolated➤ Challenging➤ Disruptive➤ Disturbed behaviour		<u>Mental Health issues:</u> <ul style="list-style-type: none">➤ Anxiety➤ Depression➤ Self-Harming➤ Substance misuse➤ Eating disorder➤ Unexplained physical symptoms		
School based processes to support children and young people				
<u>Initial Stage</u> Behaviour/Mental health issues identified/concerns pass on to DSL/Mental health lead/Safeguarding and welfare officer				
<u>Working together</u> DSL/Mental health lead/Safeguarding and welfare officer with responsibility to meet and discuss concerns				
ASSESS				
<u>Gather Information</u> Key data: attainment/attendance/behaviour/SEN/Pastoral system –Teachers perspectives SENDCo/SLT/Safeguarding Officer/Family Support Practitioner Strengths and difficulties questionnaire – Parent/Teacher/Child				
PLAN → DO				
<u>Internal response:</u> Refer to school nurse	<u>Internal response:</u> Refer for Counselling	<u>Internal response:</u> Supporting letter to Doctors for family	<u>Internal response:</u> Refer for Social Skills/ELSA sessions	<u>Internal response:</u> Refer for Anger Management
REVIEW				
<u>External response:</u> Refer to CAMHS	<u>External response:</u> Refer to CAF		<u>External response:</u> Refer to Customer First/MASH	

