



## **Mental Health & Wellbeing Policy**

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### **Mental Health Team and their responsibilities**

**Mental Health Champion and Lead - Helen Davies ( PSHE/SMSC Lead - Curriculum and Standards of Healthy Lives offer-policy development and Safeguarding Leader)**

**Inclusion and Safeguarding- Evelyn McSweeney**

**Occupational Health- Nessie Brooks ( Staff support)**

**School Counsellor – Symone Stephens- Morgan**

**Mental Health First Aider- Tina Lindsay - staff training and support**

**Mental Health Governor Lead- Janet Bergin- Miah**

## **1. Why mental health and wellbeing is important**

At John Scurr Primary School we aim to promote positive mental health and wellbeing for our whole school community (children, 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 during their school career and some face significant life events.

Our open culture allows students' voices to be heard, and through the use of effective policies and procedures we ensure a safe and supportive environment for all affected - both directly and indirectly - by mental health issues.

Our role in school is to ensure that children are able to manage times of change and stress, and that they are supported to reach their potential or access help when they need it. We also have a role to ensure that children 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.

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### 3. Policy Aims

- Promote positive mental health and emotional wellbeing in all staff and students.
- Increase understanding and awareness of common mental health issues.
- Enable staff to identify and respond to early warning signs of mental ill health in students.
- Enable staff to understand how and when to access support when working with young people with mental health issues.
- Provide the right support to students with mental health issues, and know where to signpost them and their parents/carers for specific support.
- Develop resilience amongst students and raise awareness of resilience building techniques.
- Raise awareness amongst staff and gain recognition from SLT that staff may have mental health issues, and that they are supported in relation to looking after their wellbeing; instilling a culture of staff and student welfare where everyone is aware of signs and symptoms with effective signposting underpinned by behaviour and welfare around school.

### 4. Key Staff Members

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 children with mental health needs get early intervention and the support they need.

All staff understand possible risk factors that might make some children more likely to experience problems, such as: 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 should 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

This policy aims to ensure all staff take responsibility to promote the mental health of students, however key members of staff have specific roles to play:

- Designated Safeguarding Leads
- Inco

- Mental Health First Aid Champion
- PSHE Coordinator

If a member of staff is concerned about the mental health or wellbeing of a student, in the first instance they should speak to the class teacher or report to CPOMS.

If there is a concern that the student is high risk or in danger of immediate harm, the school's child protection procedures should be followed.

If the child presents a high risk medical emergency, relevant procedures should be followed, including involving the emergency services if necessary

## **5. Promoting Children's Positive Mental Health**

We believe the School has a key role in promoting children positive mental health and helping to prevent mental health problems. Our School has developed a range of strategies and approaches including:

### *Pupil-led activities*

- Assemblies to raise awareness of mental health.
- Friendship Squad – a lunchtime group supporting younger children at lunchtime.

### *Class activities*

- Using 'Golds' to praise children for showing the 5 R's
- Year 2-6 having a 'solve it box' where children can write topics or concerns that they want to discuss. This can also be led by things that are in the news or topical such as 'Children in Need' or 'Comic Relief'.
- P4C (philosophy for children) sessions working developing the '4 C's' collaboration, creativity, caring and critical thinking and pitched around Jigsaw- our PSHE curriculum
- A feelings board in the classrooms where children self identify how they are feeling when they come into class or move if that changes throughout the day. Adults can then address those feelings in class and decide what to do next.

### *Whole school*

- Wellbeing week – whole school focus on doing things which make us feel good

- Displays and information around the School about positive mental health and where to go for help and support
- Staff mental health leaflet

#### *Small group activities*

- Peer mentoring – children working together to solve problems and planned sessions working with the school achievement advocate.
- Working with the school counselor.
- THEWS- a new service that we run with support from CAMHS.

#### ***Teaching about mental health and emotional wellbeing***

The skills, knowledge and understanding our students need to keep themselves - and others - physically and mentally healthy and safe are included as part of our PSHE curriculum and our peer mentoring programme.

In our PSHE curriculum we cover these themes in each year group: Families and friendships, Safe relationship, Respecting ourselves and others, Belonging to a community, Media literacy and digital resilience, Money and work, Physical health and Mental wellbeing, Growing and changing and Keeping safe We will follow the guidance issued by the PSHE Association to prepare us to teach about mental health and emotional health safely and sensitively.

<https://www.pshe-association.org.uk/system/files/2.%20Primary%20Programme%20Builder%20-%20Thematic%20model.pdf>

Incorporating this into our curriculum at all stages is a good opportunity to promote students' wellbeing through the development of healthy coping strategies and an understanding of students' own emotions as well as those of other people.

Additionally, we will use such lessons as a vehicle for providing students who do develop difficulties with strategies to keep themselves healthy and safe, as well as supporting students to support any of their friends who are facing challenges.

#### **6. Involving Children**

The School Council led work on mental health in their classrooms and discussed what ways we can promote mental health and wellbeing in our school. School council have been keen to allow for more

shared playtime between year groups to promote peer relationships between older and younger children (we are currently not able to fulfil this but will in the future). School council see this as a positive way to give them more independence in resolving friendship issues. It means older children are able to provide peer support and younger children have role models to look up to.

We seek pupil's views about our approach, curriculum and in promoting whole school mental health activities. We always seek feedback from children who have had support to help improve that support and the services they received.

## **7. Identifying, referring and supporting children with mental health needs**

### **Our approach:**

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

### **Possible warning signs, which all staff should be aware of 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

### **Disclosures by children and confidentiality**

If a student chooses to disclose concerns about themselves, or a friend, to any member of staff, the response will be calm, supportive and non-judgemental.

All disclosures should be recorded confidentially on CPOMs

- Date
- Name of member of staff to whom the disclosure was made
- Nature of the disclosure & main points from the conversation
- Agreed next steps
- If a Mentoring Programme is in place, any disclosures made will also map with this process.

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 CPOMs. The level of need is then decided between the inclusion lead and the class teacher, next steps are decided to ensure that children get the support they need. This will either be 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.

<b>Need</b>	<b>Evidence-based Intervention and Support</b>	<b>Monitoring</b>
The level of need is based on discussions at inclusion meetings with key members of staff and involves parents and children.	the kinds of intervention and support provided will be decided in consultation with key members of staff, parents and children.	
Low need	General support E.g. School Nurse drop in, class teacher/TA support, peer	Class teacher to observe and record any changes in behaviour and review regularly.
	support or an informal meeting with parents.	

Some need	Access to in school nurture groups, family support worker, school nurse, educational psychologist, 1:1 intervention, small group intervention, skills for life/wellbeing programmes, circle of friends. These may be with the school counsellor or the school achievement advocate. Where appropriate there may be access to parenting classes.	All children needing targeted individualised support will have an Individual Care Plan drawn up setting out <ul style="list-style-type: none"> <li>• The needs of the children</li> <li>• How the pupil will be supported</li> <li>• Actions to provide that support</li> </ul>
Highest need	THEWS/ CAMHS-assessment, 1:1 or family support or treatment, consultation with school staff and other agencies Other External agency support  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.	Any special requirements Children and parents/carers will be involved in the plan. The plan and interventions are monitored, reviewed and evaluated to assess the impact.  The Care Plan is overseen by the inclusion lead and class teacher.

## 8. Targeted Support

We recognise some children and young people are at greater risk of experiencing poorer mental health. For example, those who are in care, young carers, those who have had previous access to CAMHS, those living with parents/carers with a mental illness and those living in households experiencing domestic violence.

We work closely with school nurses and their teams in supporting the emotional and mental health needs of school-aged children and are equipped to work at community, family and individual levels. Their skills cover identifying issues early, determining potential risks and providing early intervention to prevent issues escalating.

School referrals to a specialist service will be made by the inclusion 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.



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

### SEND and mental health

Persistent mental health problems may lead to children 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).

## 9. Involving parents and carers

If we wish to inform parents there are questions to consider first:

- Can we meet with the parents/carers face-to-face?
- Where should the meeting take place
- Who should be present – students, staff, parents etc.?
- What are the aims of the meeting and expected outcomes?

We are mindful that for a parent, hearing about their child's issues can be upsetting and distressing. They may therefore respond in various ways which we should be prepared for and allow time for the parent to reflect and come to terms with the situation.

Signposting parents to other sources of information and support can be helpful in these instances. At the end of the meeting, lines of communication should be kept open should the parents have further questions or concerns. Booking a follow-up meeting or phone call might be beneficial at this stage.

Ensure a record of the meeting and points discussed/agree are added to the pupil's record and an Individual Care Plan created if appropriate.

Parents and carers will always be informed if their child is at risk of danger and children may choose to tell their parents and carers themselves.

We make every effort to support parents and carers to access services where appropriate. Our primary concern is the children, 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.

### **Promoting Mental Health**

We recognise the family plays a key role in influencing children and young people's emotional health and wellbeing; we will work in partnership with parents and carers to promote emotional health and wellbeing by:

- Ensuring all parents are aware of and have access to promoting social and emotional wellbeing and preventing mental health problems;
- Highlighting sources of information and support about common mental health issues through our communication channels (website, newsletters etc.);
- Offering support to help parents or carers develop their parenting skills. This may involve providing information or offering small, group-based programmes run by community nurses (such as school nurses and health visitors) or other appropriately trained health or education practitioners; and
- Ensuring parents, carers and other family members living in disadvantaged circumstances are given the support they need to participate fully in activities to promote social and emotional wellbeing.

### **10. 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 children and know what to do and where to get help. Our Mental Health Ambassador is due to become a qualified 'mental health first aider' and all staff have completed the Educare course 'Mental Wellbeing for Children and Young People' and are aware of the possible warning signs to look out for.

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, we have a termly 'holding the day session', teachers have the opportunity for early leave or off site PPA as needed in negotiation with line managers, being fit and active is promoted among staff ;such as the football club, staff who are parents of children within the school can attend in school events, tea and coffee is available to staff and workload is reviewed regularly within the whole school team. Staff can meet with occupational health to discuss what support could be made if they need it.

## **11. COVID 19**

During the COVID 19 pandemic care has been taken to ensure staff, parents, carers and children are supported in a time which we recognise has been hard on everyone's mental wellbeing. Well-being leads were assigned staff to check in on during time working from home. Staff were sign posted to occupational health if needed. There was an allowance for phased return and readjustment of hours where necessary. The appraisal and teaching and learning reviews have been scaled back so that teachers are not under undue stress at this difficult time and staff have been encouraged to go home early where they can.

Parents and carers have been in regular contact with teachers. The safeguarding team have highlighted vulnerable children and continue to check in and support those families as needed. Children returned to school to a recovery curriculum and a whole school focus on well-being, and our place in the world. Children are encouraged to talk through any worries or concerns through Philosophy for Children and Oracy work.

## **12. How the policy was developed and who was consulted**

The development of this policy was led by our Mental Health Ambassador Antonia Debbonaire in consultation with children, staff and governors.

- School Council were given an opportunity to discuss how mental health should be taught in school and what things could support positive mental health in school.
- Staff discussed the draft policy at a staff meeting.
- Governors agreed to Policy in December 2021

### 13. 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.

This policy will be reviewed every two years as a minimum. The next review date is **December 2023**. In between updates, the policy will be updated when necessary to reflect local and national changes.