

Harmony Trust

Positive Mental Health + Well-Being 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 academy, we aim to promote positive mental health for every member of our staff and pupils. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable individuals. In addition to promoting positive mental health, we aim to recognise and respond to mental ill health and lack of well-being. In an average classroom, three children can be suffering from a diagnosable mental health issue. By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for pupils affected both directly, and indirectly by mental ill health.

Scope

This document describes the trust's approach to promoting positive mental health and wellbeing. This policy is intended as guidance for all staff including non-teaching staff and the trustees. This policy should be read in conjunction with our medical and behaviour policies in cases where a pupil's mental health overlaps with or is linked to a medical issue and the SEND policy where a pupil has an identified special educational need.

The Policy Aims to:

- Promote positive mental health and well-being in all staff and pupils
- 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 pupils with mental health issues
- Provide support to pupils 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 pupils. Staff with a specific, relevant remit include:

- Sarah Curtis- Principal/DSL/DSL/MH/MH First aider

Any member of staff who is concerned about the mental health or wellbeing of a pupil should speak to the mental health 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 designated child protection office of staff or the head teacher. If the pupil 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 Sarah Curtis. Guidance about referring to CAMHS is provided in Appendix F.

Individual Care Plans

It is helpful to draw up an individual well-being support plan for pupils causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the pupil, the parents and relevant health professionals. This 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 and the support the academy will provide
- Provision provided by external agencies
- To be reviewed at least termly

Teaching about Mental Health & Well-Being

The skills, knowledge and understanding needed by our pupils 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'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 will dedicate a minimum of at least 30 mins per week to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms within PSHE lessons. Class teaching will also cover resilience, attitude to learning, emotions and regulation of feelings including the 'SEEDS' to positive Mental Health. Clear links should be made to the character education facilitated by The Harmony Pledge and the DfE Character Education framework guidance published 11.19.

Signposting

We will ensure that staff, pupils 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 can be discussed with the Mental Health Lead.

We will display relevant sources of support on parent and child notice boards and will regularly highlight sources of support to students within relevant parts of the curriculum.

Warning Signs

School staff may become aware of warning signs which indicate a pupil 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 our mental health first aiders, Mental Health lead and SENCo.

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

Managing disclosures

A pupil 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 pupil 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 student's emotional and physical safety.

For more information about how to handle mental health disclosures sensitively see appendix E. All disclosures should be recorded on CPOMs.

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 should be shared with the mental health lead, who will offer support and advice about next steps.

Any concerns relating to a child's emotional or mental wellbeing should be recorded on CPOMs. This referral will alert the Designated Safeguarding Lead who will assess the referral and take the appropriate next steps. These may be:

- Referral to social care- if there is an immediate concern for safety
- Discussion with parent/ carer
- Referral to school nursing service
- Single point of access referral
- In partnership with parents, school may initiate a Wellbeing Support Plan/IEP
- Complete an Early Help assessment form.

Confidentiality

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

- 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 pupil 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. If we believe our pupil is likely to suffer significant harm, we may make the appropriate referrals without consent. It is always advisable to share disclosures with a colleague, usually the mental health lead, this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the pupil, it ensures continuity of care in our absence and it provides an extra source of ideas and support.

Parents must always be informed if a child makes a disclosure concerning their emotional wellbeing and mental health. Pupil may choose to tell their parents themselves. If this is the case, the pupil should be given 24 hours to share this information before the school contacts parents. However, school will contact parents if child is likely to suffer from immediate significant harm. We should always give pupil the option of us informing parents for them or with them. If a pupil gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but a DSL or Deputy 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 pupil, other members of staff.
- What are the aims of the meeting?

We should be accepting of the various emotions that can be triggered when parents are informed of concerns and disclosures/referrals. We should consider giving the parent time to reflect. We should always highlight further sources of information and give them leaflets to take away where possible as they may want further sources of support and information.

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 (CPOMs).

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 coffee mornings
- 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.
- Introduce parents to our Well-being committee
- Offer workshops and courses in collaboration with local businesses

Supporting Peers

When a pupil is suffering from mental health issues, it can also impact their friends. Friends often want to support but do not know how. 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 pupil 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 portal² 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 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 the Principal, who can also highlight sources of relevant training and support for individuals as needed.

Staff support

The culture, ethos and environment of the school will have an impact on both pupils and staff well-being. Carlyle Infant and Nursery Academy aims to provide calm, dignity and structure in every space and activity. This is a very effective way to support mental health.

CINA deploys a coaching culture which enables staff to support each other through dialogue to overcome any challenges which may arise.

The leadership team, is responsible for determining the training needs of the staff to enable them to be aware of the common symptoms of mental health problems.

This policy will be reviewed every 3 years as a minimum. It is next due for review in March 2024

Appendix F: What makes a good CAMHS referral?⁴

If the referral is urgent it should be initiated by phone so that CAMHS can advise of best next steps

Before making the referral, have a clear outcome in mind, what do you want CAMHS to do? You might be looking for advice, strategies, support or a diagnosis for instance.

You must also be able to provide evidence to CAMHS about what intervention and support has been offered to the pupil by the school and the impact of this. CAMHS will always ask 'What have you tried?' so be prepared to supply relevant evidence, reports and records.

General considerations

- Have you met with the parent(s)/carer(s) and the referred child/children?
- Has the referral to CMHS been discussed with a parent / carer and the referred pupil?
- Has the pupil given consent for the referral?
- Has a parent / carer given consent for the referral?
- What are the parent/carers attitudes to the referral?

Basic information

- Is there a child protection plan in place?
- Is the child looked after?
- name and date of birth of referred child/children
- address and telephone number
- who has parental responsibility?
- surnames if different to child's
- GP details
- What is the ethnicity of the pupil / family.
- Will an interpreter be needed?
- Are there other agencies involved?

Reason for referral

- What are the specific difficulties that you want CAMHS to address?
- How long has this been a problem and why is the family seeking help now?
- Is the problem situation-specific or more generalised?
- Your understanding of the problem/issues involved.

Further helpful information

- Who else is living at home and details of separated parents if appropriate?

⁴ Adapted from Surrey and Border NHS Trust