



BEAL VALE PRIMARY SCHOOL

Part of Crompton House CofE Multi Academy Trust

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Emotional Health & Mental Wellbeing Policy

Statement of General Aims of the School

The Governors and Staff of Beal Vale Primary School believe that we provide the vital transition from home to the outside world, and another step in the learning process which begins the moment a child is born. We believe that Learning is for Life.

Our school motto is:

Learning is for Life, Enjoy the Journey!

We hope to lay the foundation for academic learning, fostering a love of knowledge and a desire to achieve. We seek to provide a setting that gives all children the best possible learning opportunities, matched to their individual needs, within a happy and safe environment.

We are committed to providing equal opportunities for all. We recognise and value diversity within our school, community and the wider world.

Whilst academic achievement is important, we recognise our role in developing the “whole child”. Therefore, we aim to promote not just intellectual growth but his/her physical, social, moral, spiritual, emotional, creative and aesthetic development, as well as raising self-esteem, encouraging a sense of responsibility, initiative, and self-discipline.

As a School we continually strive to improve and aim to prepare our pupils to make a positive and responsible contribution to life in our ever-changing and increasingly technological world. We aim to develop a strong partnership with parents and encourage all our pupils to develop as citizens of the school and wider community.

This policy is intended as guidance for all staff, including non-teaching staff and governors. It may be read in conjunction with our Medical Policy 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 Mental Health and Wellbeing Policy is also relevant to but not excluding other policies and documents;

Health and Safety Policy	Child Protection and safeguarding policy
Behaviour Policy	Data Protection Act
The Home-School Agreement	Equal Opportunities Policy
Foundation Stage Policy	Anti-bullying Policy
Managing pressure and reducing stress in the workplace Policy	

Rationale

Our intention is to promote positive emotional health and mental wellbeing across the whole school community, as well as every pupil and staff member. We pursue this by utilising whole school, universal approaches alongside selected and targeted approaches for those who require additional support for identified concerns.

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health, as well as increasing understanding and awareness of common mental health issues.

By developing and implementing practical, relevant and effective procedures we can promote a safe and stable environment for pupils affected by emotional health and mental wellbeing concerns: this includes those affected by the emotional health of members of their families and/or peers.

We advocate the use of the term 'Emotional Health and Mental Wellbeing' to highlight the inclusive nature of our approach. We deliver our emotional health and mental wellbeing support from the premise that: "Health is a state of completely physical, mental and social well-being and not merely the absence of disease or infirmity" (*World Health Organisation, Mental Health: A State of Well-Being, 2014*).

Aims

- Promote positive emotional health and mental wellbeing across the school community
- Develop and sustain universal interventions which will be accessed by all pupils and embedded in the ethos and culture of the school
- Increase understanding and awareness of common mental health issues
- Provide information for pupils and families about promoting positive emotional health and mental wellbeing
- Provide support to pupils and families when a pupil is experiencing mental ill health
- Provide support to pupils and families when a family member is experiencing mental ill health
- Alert staff to early warnings of mental health concerns and the process for reporting these
- Provide support to staff working with pupils with mental health issues
- Provide support and compassion to staff experiencing mental ill health
- To utilise the Oldham framework 'Supporting Young Minds in Tough Times' and self-assessment audit to evaluate and develop provision within school, including staff training needs
- Utilise the Graduated Response of Universal, Selected and Targeted support for pupils (See Appendix)
- To embed the Assess-Plan-Do-Review process (see Appendix) to ensure high quality work is monitored and evaluated.

- To commission effective, evidence-based and good value interventions for pupils by applying the Quality Assurance Framework (Pennine Care Foundation Trust, 2016)
- We seek to raise awareness amongst staff and gain recognition 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 pupil welfare where everyone is aware of warning signs, with effective signposting underpinned by behaviour and welfare throughout the school.

Comment [T1]: Do we follow any framework when commissioning 'Off the record'??

Comment [BA2]: I have no idea should I remove ths then?

Training

Training schedules will be responsive and lead by the needs of the pupil population. This ensures that support matches the changing needs of the school as a whole and each cohort.

As a minimum, all staff will receive training about recognising and responding to mental health issues and associated topics as part of their Continuing Professional Development. This will be in addition to regular Child Protection training and updates. Staff are also able to request relevant training as part of their Performance Management process.

We actively promote and record the use of MindEd; an online training resource which provides high-quality, free training for school staff around emotional health and mental wellbeing.

School will make links with suitable associations and charities who can support with training and provision in school, utilising the Quality Assurance Framework (Pennine Care Foundation Trust, 2016)

Any suggestions for individual, group or whole school CPD should be discussed with SLT who can also signpost sources of relevant training and support for individuals as needed.

Comment [T3]: Do we need to do this??

Comment [BA4]: same as above I am not sure where would I find this out?

Staff Wellbeing

A key component in the delivery of the Universal offer is staff wellbeing; ensuring that staff are well-supported and able to deliver quality provision for emotional health and mental wellbeing to all pupils. Therefore, as a school, we are committed to promoting positive mental, physical and emotional wellbeing and will provide suitable support for all members of staff.

Ethos & Environment

We encourage staff as individuals to accept responsibility for their own mental, physical and emotional wellbeing and promote an open culture in which emotional health and mental wellbeing are taken seriously and in which staff are supported in order that they may seek any help and support they need. Links to the Education Support Partnership are promoted and referrals to Occupational Health are supported.

We promote a culture of sympathetic alertness, remaining mindful of any indication of changes in staff behaviour, performance or signs of being under stress. This culture extends to the ability to have open conversations with colleagues about how they are feeling and their mental health without fear of stigma.

Policy & Procedure

Our Improving Attendance Policy is supportive of staff with emotional health and mental wellbeing issues, both during any periods of absence and upon their return to work, including phased returns. This policy is available on the Beal Vale Conference facility. The school also purchases a Service Level Agreement for Occupational Health.

We will ensure that all school policies are assessed for their workload impact and work/life balance to promote positive mental health.

In order to promote a good work/life balance, the Senior Leadership Team do not expect a response to any school-related emails after 6pm or at weekends except under exceptional circumstances.

We shall be understanding of the differing needs of the staff, at different points and events during their life cycles, and offer support accordingly, if and when required. This may include support for pregnant women, older women during the menopause, those with caring responsibilities, and those experiencing loss, bereavement or a change in life circumstances. Individuals are encouraged to discuss these matters with Head Teacher to explore what adjustments can be implemented.

General

We undertake surveys to monitor the wellbeing of all staff. These results are shared and acted upon by the Senior Leadership Team to see the impact of interventions such as reduced marking, wellbeing initiatives etc.

We will ensure that all staff have access to training sessions on health and wellbeing in school, including practical sessions to deal with wellbeing issues – both for pupils as a group and individually. Appropriate time and resources will be dedicated to this.

We provide wellbeing support to staff in a variety of ways including:

- Promotion of links to the Education Support Partnership
- Staff can access the services of ‘Off the record’ counselling, requests can be made confidentially through the Head Teacher.
- Staff have access to the Occupational Health Scheme.

Teaching about Emotional Health & Mental Wellbeing

The skills, knowledge and understanding needed by our pupils to keep themselves and others physically and mentally healthy and safe are taught across all curriculum areas, but particularly in our developmental PHSE curriculum. Through planned programmes and informal curricula, opportunities exist to explore emotional health and mental wellbeing issues appropriate to children’s age and stage of development.

We also promote emotional health and mental wellbeing through our school ethos, including Health Champion assemblies and activities.

- Staff use a variety of methods and opportunities to promote emotional health and mental wellbeing alongside the formal curriculum, These complement the whole school approach and overall ethos of the school. These include:
- Class Codes of Conduct/ Rules
- Celebrating awareness days and campaigns such as Children’s Mental Health Day, Anti-Bullying Week etc.
- Reward systems embracing positive behaviour and individual achievements
- Promoting resilience and resourcefulness through Building Learning Power approaches
- Providing forums for listening and talking
- Encouraging pupil voice, often through the School Council
- Supporting Parents/Carers & Families

We see parent/carer involvement as a vital part of promoting emotional health and mental wellbeing: alongside an open-door policy, regular opportunities exist to promote partnerships with parents/carers, including:

- Reception welcome meetings – a chance to meet staff, find out about the organisation, routines and curriculum, enabling parents to support their children effectively with day-to-day change, promoting resilience.
- A regular Parents’ Group for Reception parents builds relationships between school and parents which promotes the partnership in later years.
- Structured parents’/carers’ meetings with class teachers to provide feedback
- Annual parental questionnaires send out by Parent Governors, to help us build on what we do well and identify areas for improvement
- Parent workshops on key topics ie: phonics, SATs etc.

We recognise that families play a key role in influencing children’s emotional health and mental wellbeing, therefore it is vital that we work with parents/carers to promote positive wellbeing for them. We do this by:

- Highlighting sources of support available within school and the local community: we will ensure this information contains services that are available to promote positive emotional wellbeing for all pupils, as well as those for children experiencing mental ill health. This information will be delivered via the curriculum, newsletters and the school website.
- Making this policy easily accessible to parents/carers
- Offering support to help parents/carers develop their parenting skills. This may include providing information or offering programmes run by appropriately trained practitioners.
- Ensuring parents/carers living in disadvantaged circumstances are given the support they need to participate fully in activities to promote social and emotional wellbeing.

- Providing information about sources of support and information for adult mental health and emotional wellbeing services and making these readily available through our communication channels ie: newsletter/website etc.

The below links have an extensive directory of local agencies and organisations we can signpost staff and families to:

<https://www.oldham.gov.uk/hsc/services/send/>

https://www.oldham.gov.uk/downloads/file/4710/supporting_young_minds_through_tough_times

What does an emotionally healthy child look like?

School staff may become aware of certain signs which indicate a pupil may be experiencing emotional health or mental wellbeing issues. These should **always** be taken seriously and staff observing **any** of these should communicate their concerns with the Designated Safeguarding Lead or SENCO

Possible warning signs include (but are not limited to):

- Expressing feelings of failure, uselessness or loss of hope
- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating habits
- Changes in sleeping habits, including falling asleep in lessons
- Increased isolation from friends and family or becoming socially withdrawn – this may include not wanting to spend time with friends at break-time, frequent fallouts or seeking adult company/reassurance.
- Changes in activity and mood
- Talking or joking about self-harm or suicide
- Using drugs or alcohol
- Changes in clothing – eg. long sleeves in warm weather
- Secretive behaviour
- Avoiding PE or asking to get changed privately
- An increase in lateness or absenteeism
- Repeated physical pain or nausea with no evident cause – this may include repeatedly expressing feelings of being unwell or requesting to visit the first aid room/go home

We also recognise that some children and young people have been exposed to multiple risk factors which may mean they are at greater risk of experiencing poorer mental health. For example: those who are looked after or previously looked after children, young carers, those who have had previous access to mental health services, those living with

parents/carers with a mental illness and those living in households experiencing domestic violence.

These risk factors **do not** mean that the child **will** experience poorer mental health, they should be considered alongside resilience factors such as: a secure attachment experience with appropriate adults, good communication skills, capacity to reflect, a positive school climate enhancing belonging and connectedness, an open-door policy for children to raise concerns, a range of leisure activities and a whole school approach to supporting good mental health.

We promote a culture of sympathetic alertness, particularly to changes in behaviour or presentation of pupils. Staff should be aware that some children will not openly demonstrate any of the above signs, even when experiencing distress.

If you are at all concerned about a child, always inform the Designated Safeguarding Lead.

Managing Concerns

A pupil may choose to disclose concerns about themselves or a friend to **any member of staff** so it is vital that **all staff know how to respond appropriately to a disclosure or concern about a child's mental health**. School will source and provide training for all staff to ensure they are comfortable with this process.

In this situation, the member of staff's response should always be calm, supportive and non-judgemental. Staff should listen, rather than give advice and if questions are needed, these should be open such as "tell me about..." or "describe what happened". Our first thoughts should be of the pupil's emotional and physical safety rather than exploring "why?".

In line with the Safeguarding Policy, all disclosures must be recorded in writing, as soon as possible. The report should detail:

- Date and time of the concern/disclosure
- The names (and positions if applicable) of those present
- What was discussed, in as much detail as possible
- What the agreed next steps are
- Who the concern/disclosure was reported to.

This report should be held on the pupil's confidential file, and shared with the Designated Safeguard Lead who will offer support and advice about next steps.

Confidentiality

We need to be honest with pupils who make a disclosure about themselves or a friend. If we feel it is necessary to pass on the concerns, we must inform them:

- Who we are going to tell (parents/carers, other staff, health care professionals etc.)
- What we are going to tell them
- Why we need to tell them

Parents/carers will be informed, and their support sought, unless there is reason to believe that there is an underlying child protection issue, in which case the DSL and local MASH team will be informed immediately. Pupils will be informed if this is the case.

Staff will share concerns/disclosures with a colleague, usually the DSL or Lead for Emotional Health and Mental Wellbeing, as this helps to safeguard their own emotional wellbeing as they are no longer solely responsible for the pupil. It also ensures continuity of care in case of absence and provides an extra source of ideas and support. We will discuss this with the pupil.

Support will be offered to staff to protect their own emotional wellbeing, and gives them a safe space to process and reduce any negative effects of this challenging work upon their personal lives.

Sharing Concerns with Parents/Carers

It is standard practice to inform parents/carers of concerns unless there is reason to believe there is an underlying Child Protection concern; however, we remain mindful of the need to be sensitive in our approach.

Mental ill health can affect individuals of any age, background, ethnicity or gender; yet it may sometimes be difficult or distressing for parents to learn that their child is experiencing difficulties with their emotional wellbeing. Families may respond with fear, anger, upset or even shame during initial conversations: although we may find this challenging, we should be accepting of this (within reason) and give parents/carers time to reflect and come to terms with the change in situation. For this reason, we recommend a follow-up meeting or telephone call to ensure lines of communication are kept open and that parents/carers feel able to partake in the process of support.

Before these initial conversations take place, it should be considered:

- Can we meet with parents/carers face-to-face? (this is usually preferable)
- Where should the meeting take place? – Some families are not comfortable in school or may have commitments such as caring which make attendance in school difficult.
- Who should be present at the meeting? Pupil, other family members, staff (although it is ideal for the member of staff to whom a disclosure was made to be present, it may be in their best interests to have the support of a pastoral lead/DSL etc),
- What are the aims and expected outcomes of the meeting?

Ensure a record of the meeting and points discussed/next steps agreed is kept and added to the pupil's record.

A graduated response to concerns will be followed. In most cases, a Learning Mentor Referral Form will be completed and a targeted intervention implemented, either 1:1 or small group led by the Learning Mentor. A referral to the school commissioned councillor maybe considered and implemented. In some cases, a Care and Support Plan (see below) should also be created if support above the Universal level is proposed.

Care and Support Plan (CSP)

A Care and Support Plan will be drawn up for pupils causing concern, who receive a diagnosis pertaining to their mental health or who are accessing internal or external support services. This should be drawn up involving the pupil, the parents/carers and relevant health professionals alongside school.

The plan will include:

- Details of the pupil's condition
- Special requirements and precautions
- Any medication and side effects
- What to do and who to contact in an emergency
- The role school can play and specific staff involved
- Any adjustments, interventions or support to be put in place based on the 'Assess-Plan-Do-Review' process
- Any external agencies involved and their role in supporting the child

Where a referral to an external service is appropriate, this will be lead and managed by the SENCO.

For those children who require additional support with their emotional health and mental wellbeing, we will additionally support parents/carers by:

- Involving parents/carers, and the child in the Assess-Plan-Do-Review process to identify the specific support required
- Keeping parents/carers informed about the related work being carried out in school

Written by: XXXX

Adopted by Governing Body: XXX

This policy will be reviewed every two years as a minimum. The next review is XXX

In between reviews the policy will be updated when necessary to reflect local and national changes. This is the responsibility of XXX

Any personnel changes will be rectified immediately

Lead Members of Staff

Lead for Emotional Health & Mental Wellbeing – Janice Wild
Named Governor for Emotional Health & Mental Wellbeing – Chris Richards
Designated Safeguarding Lead – Head teacher
Deputy Safeguarding Lead – Ash Hussain
LSA for Mental Health interventions – Catherine Founde
PSHCE Curriculum Coordinator – Kim Bolton

Appendix

Graduated Response

School will respond to concerns for emotional health and mental wellbeing using a graduated response, as advocated in the Oldham Framework:

Universal Support

This is what school offers *all* children to promote positive mental health. Support is embedded in all classrooms and is part of the whole school approach. Eg. Daily Mile, worry boxes in class, strong curriculum presence for emotional health and mental wellbeing etc.

Selected Support

This is where we put specific interventions into place. These are delivered in school by school staff, sometimes in consultation with other agencies, (eg. Educational Psychology, Healthy Young Minds, MIND, School Nurses). Examples of interventions include: Self-esteem groups, 1:1 mentoring by specific LSA, social skills groups.

Stage 3: Targeted Support

This is where specific interventions are delivered in school by external agencies. School remain involved. Eg. MIND, Healthy Young Minds, Educational Psychologists, QEST.

Children may move around within the different stages depending on their need/improvement.

Assess – Plan – Do – Review Process

To deliver Selected and Targeted Support for children and young people with emotional health and wellbeing needs this cycle should be followed.

➤ **Assess**

Clear analysis of the child's need. There should be a holistic and collaborative approach to assessment using tools such as a Functional behaviour Analysis and emotional wellbeing checklists, ensuring views are gathered from the child and the parent/carer.

➤ **Plan**

Recording of adjustments, interventions and support to be put in place, based on the findings of the assessment.

➤ Do

Implementation of the agreed adjustments, interventions and support.

➤ Review

Evaluation of the impact and quality of the adjustments and support, along with the views of the child and their parents. This information should feed into the next cycle.

“Has the implemented plan had a positive impact?” – If yes, the cycle should be continued, if not, the cycle should be repeated at the next level.

It is important that despite the involvement of external professionals, the school retains ‘ownership’ of the provision given to support the child, and continues to coordinate the response to the child through continuing ‘assess-plan-do-review’ cycles, with input from other professionals to shape appropriate adjustments, interventions and support.

Important: Children in Crisis

There may be isolated times where it is not appropriate or safe to follow the graduated approach, and a more immediate response is required.

Examples of this include:

- If a child informs you they have taken an overdose or made an attempt to end their life
- If a child informs you they have actual INTENT or a PLAN to end their life
- If a child appears to be in a highly distressed state due to experiencing altered perceptions, unusual or abnormal experiences such as hearing voices.

In these circumstances it would be appropriate to implement one of the following steps:

- If the child reports an overdose/severe self-harm and appears physically unwell then an ambulance should be called and parents/carers informed.
- If the child reports any intent/plan to end their life a telephone consultation should be initiated with Health Young Minds and parents/carers informed before the child leaves school.
- If there is **any** uncertainty about the risk to a child or young person’s mental health or safety, please contact the duty worker at Healthy Young Minds Oldham for a consultation.
T: 0161 770 7777

If there are safeguarding concerns, the usual Safeguarding procedure will be followed