



# MENTAL HEALTH POLICY

## June 2017 (V4)

*At Trefonen RESPECT is our core value. Mutual respect and good behaviour is the expectation of all adults and children at all times.*

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### 1. Policy Statement

Mental Health is:

- *“the emotional and spiritual resilience which allows us to enjoy life and survive pain, disappointment and sadness. It is a positive sense of well-being and an underlying belief in our own and others’ dignity and worth.” (UK Health Education Authority)*
- *“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 Trefonen School we recognise that promoting positive emotional well-being is an essential component of safeguarding and understand that we have an important role in addressing mental health problems and helping pupils to develop their resilience.

### 2. Key Members of Staff

All staff at Trefonen School have a responsibility to promote the mental health of all pupils. Staff with a specific, relevant responsibility include:

Cathy Dunleavy	Senior Designated Child Protection / Safeguarding Officer
Cathy Dunleavy	Mental Health Lead
Laura Prust	Deputy Child Protection / Safeguarding Officer, with special responsibility for multi-agency liaison (including CAMHS and Early Help)
Naomi Phillips	Deputy Child Protection / Safeguarding Officer, with special responsibility for E-safety
Liz Day	Deputy Child Protection / Safeguarding Officer, with special responsibility for vulnerable pupils (e.g. looked after pupils, post-adopted pupils)
Alison Conde	Lead First Aider
Link-Governor / Governor Mental Health Champion : Nicky Beard	

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 pupil is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the designated Senior Child Protection Officer (**Cathy Dunleavy**). 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.

### **3. Scope**

This policy describes our school's approach to promoting good emotional well-being and positive mental health. It is intended as guidance for all staff including non-teaching staff and governors. It should be read in conjunction with other relevant policies, including our medical policy in cases where a student's mental health overlaps with or is linked to a medical issue and our SEND policy where a pupil has an identified special educational need that may impact on his or her mental health.

### **4. Aims**

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 students.

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 procedures we can promote a safe and stable environment for pupils affected both directly, and indirectly by mental ill health.

The specific aims of this policy are to:

(a) Help staff to:

- Promote positive mental health in all pupils
- Increase their understanding and awareness of common mental health issues
- Be alert to early warning signs of mental ill health
- Provide support to children suffering mental ill health and their peers and parents/carers
- Provide support to colleagues working with children with mental health issues.

(b) Help pupils to:

- develop psychologically, emotionally, intellectually and spiritually
- develop the skills to maintain mutually satisfying personal relationships
- use and enjoy solitude
- become aware of others and empathise with them
- play and learn
- develop a sense of right and wrong
- face and resolve problems and set-backs and learn from them
- increase their resilience and their ability to help themselves.

### **5. How will we achieve our aims (our curriculum and provision)?**

Our aims are generally promoted through our school's personal development, behaviour and welfare curriculum, our ethos and normal communication between all members of our school community. They are also promoted through specific schemes of work and targeted initiatives.

Generally, we will achieve these aims by promoting positive well-being and good mental health through our curriculum, including:

- teaching skills for self-protection against violence and abuse, including those on-line
- teaching pupils to protect themselves and each other from bullying, including cyber-bullying
- modelling respectful relationships
- helping pupils to respect their bodies and make healthy decisions
- working with and supporting parents to provide consistent guidance to their child
- ensuring that pupils know where to get advice and support as soon as they need it
- using our annual 'Children's Mental Health Week' to focus attention on , and promote positive children's mental health.

We use a layered approach to supporting positive mental health and wellbeing. This includes:

1. General provision (for all pupils)
2. Targeted provision (for specific groups or targeted at specific issues)
3. Specific Provision (for individual pupils)

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 specific and incidental PSHE and RSE curriculum.

The specific content of lessons is determined by our PSHE scheme of work along-side the particular needs of the cohort. There will always be an emphasis on enabling pupils to develop their resilience, including developing the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

At Trefonen School we follow the [PSHE Association Guidance](#) to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms. Our PSHE scheme of work is based on recommendations from the PSHE Association.

At Trefonen our curriculum to support positive emotional wellbeing and good mental health is embedded across the curriculum, but specifically includes:

- Personal, Social, Health Education scheme of work, which is supported through the 'Go Givers' teaching programme
- Shropshire's Relationships and Sex Education Curriculum '*Respect Yourself*', which we supplement with the '*Betty for Schools*' programme.
- Annual 'Children's Mental Health Week, which promotes positive emotional health and wellbeing, enabling new ideas and activities to be explored and trialled, some of which are then developed as normal practise

Other programmes / initiatives currently in place at Trefonen School include:

- '*JAM Time*' or '*Just a Minute*' (Whole school daily mindfulness activity)
- '*Relax Kids*' (Whole school programme to teach pupils strategies that help them to self-manage stress and anxiety)

- ‘Superflex’ Programme ( Year 3 transition programme to help pupils to develop social and emotional resilience as they move from KS1 to KS2)
- ‘No Worries’ Programme (Targeted support programme to help pupils in Year 5 and 6 manage stress and anxiety)
- Cohort specific transition programmes for all pupils moving to a new class / key stage / school phase
- Bespoke programmes to support identified groups / individuals with specific needs.

## 6. Risk Factors and Warning Signs

Every pupil will, at some time, experience challenges that may affect their mental health and well-being, and some may need additional support to overcome their challenges.

### Common General Risk Factors

*‘Common General Risk Factors’* that may trigger mental health problems, may include:

- Hormonal changes
- Concerns about appearance
- Wanting to fit in with peers
- Increased risk-taking
- A limited knowledge of how to manage emotions and relationships
- Experimenting with alcohol or drugs

### Common Specific Risk Factors

*‘Common Specific Risk Factors’* that may trigger mental health problems may include:

- Trauma
- Stress in personal relationships
- Stress from school work and exam pressures
- Discrimination and bullying, including cyber-bullying
- Isolation

### Warning Signs

School staff should be aware of potential warning signs that may indicate a pupil is experiencing mental health or emotional wellbeing issues. These warning signs will always be taken seriously and staff observing any of these warning signs will communicate their concerns to our school’s Mental Health and Emotional Wellbeing Lead.

Warning signs may 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
- Repeated physical pain or nausea with no evident cause
- Lateness to or absence from school / an increase in lateness or absenteeism

## 7. Mental Health Disorders

For some pupils the challenges which affect their mental health and wellbeing may be more significant. We are aware of specific mental health disorders that affect pupils, including:

- Clinical depression
- Anxiety
- Psychosis (delusions, hallucinations).

These conditions may result in **Specific Behaviours**, which may include:

- Isolation
- Negative behaviours
- Self-harm
- Eating disorders
- Susceptibility to fundamentalist ideas.

## 8. Early Intervention

For some pupils, ensuring the best conditions for pupils to thrive emotionally will not solve all of their problems and sometimes an individual response is needed. We recognise the importance of early identification and intervention.

### Individual Care Plans

It may be appropriate to draw up an individual care plan for pupils causing concern or who receive a diagnosis pertaining to their mental health. This will be drawn up involving the pupil, the parents and relevant health professionals. This may 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
- Any support from other sources.

## 9. Signposting

We understand that whenever we highlight sources of support, we will increase the chance of pupils and/or parents help-seeking. We will ensure that staff, pupils and parents are aware of sources of support within school and in the local and wider community, including professional services and charitable associations. We will direct parents towards relevant sources of support and will regularly highlight sources

of support to pupils through our school newsletter and web-site. We will endeavour to help parents to know:

- What help is available
- Who it is aimed at
- How to access it
- Why to access it
- What is likely to happen next.

## **10. Managing disclosures**

A pupil may choose to disclose concerns about themselves or a friend to any member of staff. Therefore 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 pupil's emotional and physical safety rather than of exploring 'Why?'

All disclosures should be recorded in writing 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 should be shared with the school's Mental Health Lead (**Cathy Dunleavy**) who will provide support and advice about next steps and store the record appropriately.

### **Confidentiality**

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

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

We should not usually 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, a parent or an outside body e.g. where a pupil is in danger of harm.

Disclosures should be shared with the Mental Health Lead, (**Cathy Dunleavy**). Where possible we should explain this to the pupil. This ensures continuity and quality of care and provides an extra source of ideas and support, it also helps to safeguard the emotional wellbeing of staff as they are no longer solely responsible for the pupil.

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

## **11. Working with Parents**

Parents usually welcome 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
- Ensure that all parents are aware of who to talk to, and how to get support, if they have concerns about their own child or a friend of their child
- Ensure that our Mental Health Policy is easily accessible to parents
- Share ideas about how parents can support positive mental health in their children
- 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
- Let parents know what the school is doing to support their child and engage parents in the plans.

Where it is appropriate to inform parents about a disclosure, we need to be sensitive in our approach. It can sometimes be shocking and upsetting for parents to learn of their child's issues and some 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 and where possible, highlight further sources of support, particularly those aimed at parents e.g. charitable groups, parent help-lines and forums.

## **12. Supporting Peers**

When a pupil is suffering from mental health issues, it can be a difficult time for their friends. Friends often want to support but do not always 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 setting 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 need 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

## **13. Professional Support, including CAMHS (Child and Adolescent Mental Health Service)**

There may be times when more specific professional help is required. Usually further professional support is accessed through the Early Help Framework (EHAF), but there may be times when the school can access support from a specific agency or charitable organisation more directly.

Where a referral to CAMHS or another specialist agency is appropriate, this will be led and managed by our school's Deputy Child Protection / Safeguarding Officer with special responsibility for multi-agency liaison (**Laura Prust**).

## **14. Staff Training**

Staff at Trefonen School receive regular training to help them to recognise and respond to children's mental health issues. Additional training is provided for staff where it becomes appropriate due developing situations where more in-depth knowledge is required. Consequently, staff are well trained and alert to emerging signs of mental health issues and the strategies available to support pupils.

At Trefonen School we have a rolling professional development programme that enables all staff to access high quality training through TAMHS (Teenage and Adolescent Mental Health Service).

## **15. Policy Review**

This policy will be reviewed every 3 years as a minimum. It is next due for review in July 2020.

This policy will be updated to reflect any personnel changes, new guidance or changes in legislature.

## **16. Other Relevant Documents**

This policy should be considered alongside other relevant school documents, including:

- Positive Emotional Wellbeing and Good Mental Health Action Plan
- PSHE Policy and Scheme of Work
- RSE Policy and Scheme of Work
- SEND Policy
- Medical Needs Policy
- Child Protection and Safeguarding Policy

*June 2017*

*Cathy Dunleavy*