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| **Reviewed on:** | **3rd March 22** |
| **Next review:** | **3rd March 25** |
| **Staff Responsibility:** | **A Facchin** |
| **Linked policies:** | **Child protection and Safeguarding** |
| **Signed by chair:** | **Lisa Vitler** |
| **Date:** | **3rd March 22** |

**Wellbeing and Mental Health Policy**

***Mental health is a state of wellbeing 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 Organisation)***

At Boarshaw Primary School we aim to promote positive mental health for every member of our staff and pupil community. We pursue this aim using both universal, whole school approaches and specialised targeted support.

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health.

Everyone experiences life challenges that can make us vulnerable. At times, anyone may need additional support to maintain or develop good mental health.

* 13% of young people aged 5-19 meet clinical criteria for a mental health disorder
* 10% of young people aged 8-15 experience a low sense of wellbeing
* 1 in 6 workers will experience depression, anxiety or problems relating to stress at any one time
* 1 in 5 people take a day off due to stress. Yet, 90% of these people cited a different reason for their absence
* 1 in 4 adults experience mental health issues each year

All children and young people have the right to be educated in an environment that supports and promotes positive mental health for everybody. All adults have the right to work in an environment that supports and promotes positive mental health for everybody.

**Aims**

* To promote positive mental health in pupils and staff
* Increase awareness and understanding of mental health issues
* Alert staff to early signs of mental ill health
* Provide support to staff working with young people with mental health issues
* Provide support to young people suffering from mental ill health
* Promote a learning environment that enhances positive mental health
* Have a consistent approach and whole school ethos to promote positive mental health
* A commitment to being responsive to children and young people’s needs
* Clearly defined mental health links in school policies
* Clear guidelines for internal and external referrals
* Strong links with external agencies to provide access to support and information
* A named lead for mental health promotion with the expectation that there is support and involvement and an ethos that ‘mental health is everyone’s business’

**Mentally healthy environments**

A mentally healthy environment is a place where children and young people:

* Have opportunities to participate in activities that encourage belonging
* Have opportunities to participate in decision making
* Have opportunities to celebrate academic and non-academic achievements
* Have their unique talents and abilities identified and developed
* Have opportunities to develop a sense of worth through taking responsibility for themselves and others
* Have opportunities to reflect
* Have access to appropriate support that meets their needs
* Have a right to be in an environment that is safe, clean, attractive and well cared for
* Are surrounded by adults who model positive and appropriate behaviors, interactions and ways of relating at all times

A mentally healthy environment is a place where staff:

* Have their individual needs recognised and responded to in a holistic way
* Have a range of strategies that support their mental health, eg a named person to speak to, signposting
* Have recognition of their work-life balance
* Have the mental health and well-being of the staff reviewed regularly
* Feel valued and have opportunities to contribute to decision making processes
* Celebrate and recognise success
* Are able to carry out roles and responsibilities effectively
* Are provided with opportunities for CPD both personally and professionally
* Have their unique talents and skills recognised and opportunities are provided for development
* Have time to reflect
* Can access proactive strategies and systems to support them at times of emotional needs in both the short term and the long term

A mentally healthy environment is a place where parents/carers:

* Are recognised for their significant contribution to children and young people’s mental health
* Are welcomed, included and work in partnership with school and agencies
* Are provided with opportunities where they can ask for help when needed
* Are signposted to appropriate agencies for support
* Are clear about their roles and expectations of their responsibilities in working in partnership with schools
* Opinions are sought and valued and responded to
* Strengths and difficulties are recognised, acknowledged and challenged appropriately

A mentally healthy environment is a place where the whole school community:

* Is involved in promoting positive mental health
* Is valued for the role it plays in promoting positive mental health
* Contributes towards the ethos of the school

The implementation of the policy for promoting positive mental health in school:

* Will give school a cohesive and co-ordinated approach to mental health
* Should underpin all policies and practices currently used in schools
* Will raise awareness as to how the whole school community can look after their own mental health and that of others
* Will help to de-stigmatise mental health
* Will support people and provide opportunities that enable everyone to reach their potential
* Will strengthen relationships and provide opportunities for different ways of working
* Will provide foundations for life-long learning
* Will promote and strengthen resilience throughout the whole school community and empower everyone to face life’s challenges

**A whole school approach to promoting positive mental health**

We take a whole school approach to promoting positive mental health that aims to help children become more resilient, happy and successful and to prevent problems before they arise.

This encompasses nine aspects:

1. Creating an ethos and environment that nurtures our young people.
2. Have policies and behaviours that support mental health and which everyone understands.
3. Helping children to develop social relationships, support each other and seek help when they need it.
4. Helping children to be resilient learners.
5. Teaching children social and emotional skills and an awareness of mental health.
6. Early identification of children who have mental health needs and planning support to meet their needs, including working with specialist services.
7. Effectively working with parents and carers, to promote an understanding of mental health
8. Supporting and training staff, parents and pupils to develop their skills, understanding and their own resilience.
9. We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues. We therefore aim to create an open and positive culture that encourages discussion and understanding of these issues.

**Staff roles and responsibilities, including those with specific responsibility**

* Designated Child Protection – Jackie Harland
* Deputy Designated Child Protection - Abigail Facchin, Sadia Riaz, Sarah Crowther, Nicola Wilson and Lisa Thackway
* SENDCo -Abigail Facchin
* Assistant SENDCo – Ashleigh Greenhalgh
* Mental health and wellbeing lead- Abigail Facchin
* Mental health First Aiders – Abigail Facchin, Laura Windsor and Liz Meehan
* Pastoral Lead – Mandy Evans
* PSHCE lead – Lisa Thackway

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 about 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.

We recognise that many behaviours and emotional problems can be supported within the school environment, or with advice from external professionals. Some children will need more intensive support at times, and there are a range of mental health professionals and organisations that provide support to children with mental health needs and their families.

**Supporting children’ positive mental heath and wellbeing**

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

* Campaigns and assemblies to raise awareness of mental health
* Wellbeing Warrior group to lead on weekly activities and planned events, visible around school
* Bully buster group to lead on weekly activities and planned events, visible around school

Transition programmes

* Transition Programme to secondary schools which includes all Year 6 children having a staff mentor to support a smooth transition to secondary school
* Transition support when starting a new year group for identified pupils.

Class activities

* Boarshaw brilliant and reignition board are mechanism where children can be praised for certain duties, tasks or things they have done and have them celebrated in class
* Worry eater - a similar mechanism where children can anonymously share worries or concerns in class and the Bully Buster group will help to support
* Mental health teaching programmes e.g. based on cognitive behavioural therapy
* SCARF scheme of work to support MH
* Wellbeing Wednesday in class activities

Whole school

* Wellbeing weeks, school to join in with national events to promote MH and wellbeing
* Displays and information around the school about positive mental health and where to go for help and support
* Staff mental health boards with information
* Rolling programme for staff training
* Picture News assembly resource develops a range of personal, social, spiritual, moral and cultural skills that equip children for life in modern day Britain.

Small group activities

* Nurture groups
* Resilience Training
* Talkabout – a small group intervention to improve children’s communication skills around turn taking, dealing with issues, resolving conflict

**SCARF: Safety, Caring, Achievement, Resilience, Friendship**

* At Boarshaw Primary we use the SCARF programme of learning to develop our children's understanding of staying safe, caring for others, resilience and relationships.
* The programme is centred on a values-based and ‘Growth Mindset’ approach, which promotes positive behaviour, **mental health**, wellbeing, resilience and achievement.
* There is a proven link between pupils' health and wellbeing, and their academic progress. Crucial skills and positive attitudes developed through comprehensive Personal, Social, Health and Economic education (PSHE) are critical to ensuring children are effective learners.
* SCARF provides a whole-school approach to building these essential foundations – crucial for children to achieve their best, academically, socially and **mentally**.

**Teaching about mental health and emotional wellbeing**

Through PSHCE we teach the knowledge and social and emotional skills that will help children to be more resilient, understand about mental health and be less affected by the stigma of mental health problems.

EYFS & Key Stage 1 children learn:

* To recognise, name and describe feelings including good and not so good feelings.
* Simple strategies for managing feelings.
* How their behaviour affects other people.
* About empathy and understanding other people’s feelings.
* To cooperate and problem solve.
* To motivate themselves and persevere.
* How to calm down and regulate.
* About change and loss and the associated feelings (including moving home, losing toys, pets or friends).
* Who to go to if they are worried.
* About different types of teasing and bullying, that these are wrong and unacceptable.
* How to resist teasing or bullying, if they experience or witness it, whom to go to and how to get help.

Key Stage 2 children learn:

* What positively and negatively affects their mental and emotional health.
* Positive and healthy coping strategies.
* About good and not so good feelings.
* To describe the range and intensity of their feelings to others.
* To recognise and respond appropriately to a wide range of feelings in others.
* To recognise that they may experience conflicting emotions and when they might need to listen to their emotions or overcome them.
* About resilience.
* How to motivate themselves and bounce back if they fail at something.
* How to empathise and be supportive of others.
* About change, including transitions (between Key Stages and schools), loss, separation, divorce and bereavement.
* About the consequences of discrimination, teasing, bullying and aggressive behaviours (including online bullying, prejudice-based language), as well as how to respond and ask for help if they are victims of this themselves.
* About the importance of talking to someone and how to get help.

**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 recieve.
* Monitor, review and evaluate the support with children and keep parents and carers updated.

**Early Identification**

Our identification system involves a range of processes. We aim to identify children with mental health needs as early as possible to prevent things getting worse. We do this in different ways including:

* SDQ (Social Difficulty Questionnaires).
* Analysing behaviour, exclusions, attendance and sanctions received.
* Staff report concerns about individual children to the relevant lead persons.
* Worry eaters in each class for children to raise concerns which are checked by the Class Teachers and Bully Buster lead (these are anonymous but give an indication of needs in a particular classes regularly).
* Pupil Progress Review meetings termly
* Regular staff drop in session to raise concerns.
* A parental information and health questionnaire on entry to the School.
* Gathering information from a previous school at transfer.
* Parental meetings in EYFS.
* Enabling children to raise concerns to any member of staff.
* Enabling parents and carers to raise concerns to any member of staff.
* Information available to parents/cares via the website, entrance hall and drop in sessions.

All staff have had training on the protective and risk factors (see Appendix 1), types of mental health needs (see Appendix 2) and signs that might mean a pupil is experiencing mental health problems. Any member of staff concerned about a pupil will take this seriously and talk to the Mental health lead. Should staff be alerted to a MH need that stems from a CP or safeguarding issue, this will be acted on following the school’s child protection and safeguarding policy

Staff are aware that mental health needs, such as anxiety, might appear as non compliant, disruptive or aggressive behaviour which could include problems with attention or hyperactivity. This may be related to home problems, difficulties with learning, peer relationships or development.

If there is a concern that a pupil is in danger of immediate harm then the school’s child protection procedures are followed. If there is a medical emergency then the school’s procedures for medical emergencies are followed.

**Disclosures by children and confidentiality**

We recognise how important it is that staff are calm, supportive and non-judgemental to children who disclose a concern about themselves or a friend. The emotional and physical safety of our children is paramount and staff listen rather than advise. Staff make it clear to children that the concern will be shared with the Mental health lead or the Safeguarding lead and recorded, in order to provide appropriate support to the pupil.

All disclosures are dealt with in accordance with the schools CP and safeguarding policy

**Assessment, Interventions and Support**

All concerns are reported to the Mental health lead and recorded. We then implement our assessment system, which is based on levels of need to ensure that children get the support they need, either 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.

High need - this could include;

CAMHS-assessment, 1:1 or family support or treatment, consultation with school staff and other agencies, other External agency support, other interventions e.g. art therapy, in school nurture support, hospital assessment, Educational psychologist 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.

All children needing targeted individualised support will have an Individual Care Plan drawn up setting out -

The needs of the children

How the pupil will be supported

Actions to provide that support

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 e.g. through a pre and post SDQ and if needed a different kind of support can be provided.

The Care Plan is overseen by the Mental health lead.

Medium need

Access to in school nurture group, family support worker, school nurse, art therapy, educational psychologist, 1:1 intervention, small group intervention, skills for life/wellbeing programmes, circle of friends.

Low need

General support E.g. pastoral drop in, class teacher/TA.

We have a duty of care to support children and will seek advice from medical staff and mental health professionals on the best way to support children.

**Working with specialist services to get swift access to the right specialist support and treatment**

In some case a pupil’s mental health needs require support from a specialist service. These might include anxiety, depression, self-harm and eating disorders.

Young people can have access to a range of specialist services and during the support will have contact with the service to review the support and consider next steps, as part of monitoring the children’ Individual care plan.

School referrals to a specialist service will be made by the Mental health lead or the SENDCO 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. If we feel the young person needs immediate support, parents/carers will be told to present at the hospital or GP.

Referrals could include -

* Child and Adolescent Mental Health Service (CAMHS)
* GP or hopsital
* Educational Psychologist Accessed through the Mental Health Lead or SENDCO

**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), which could be under the category of social, emotional and mental health (SEMH).

**Involving parents and carers**

We recognise the important role parents and carers have in promoting and supporting the mental health and wellbeing of their children, and in particular supporting children who do have mental health needs.

On first entry to the School, our parent’s meeting includes a discussion on the importance of positive mental health for learning. We ask parents to inform us of any mental health needs their child has and any issues that they think might have an impact on their child’s mental health and wellbeing, based on a list of risk factors pertaining to the child or family (see appendix 1). It is very helpful if parents and carers can share information with the School so that we can better support their child from the outset. All information will be treated in confidence.

To support parents and carers:

* We organise a range of activities to promote mental health, such as workshops on protective and risk factors, drop in session, training. We provide information on our website about mental health issues and local wellbeing and parenting programmes and have produced leaflets for parents on mental health and resilience. The information includes who parents can talk to if they have concerns about their own child or a friend of their child and where parents can access support for themselves.
* We include the mental health topics that are taught in the PSHCE curriculum section, on the school website
* When children start school, all parents and carers are given our mental health and resilience leaflet that includes information on how parents can support their child’s mental health and where to go for help and support.

We are aware that parents and carers react in different ways to knowing their child has a mental health problem and we will be sensitive and supportive. We also aim to reassure by explaining that mental health problems are common, that the school has experience of working with similar issues and that help and advice are available.

When a concern has been raised, the school will:

* Contact parents and carers and meet with them (In almost all cases, parents and carers will be involved in their children’s interventions, although there may be circumstances when this may not happen, such as where child protection issues are identified.)
* Offer information to take away and places to seek further information
* Be available for follow up calls.
* Make a record of the meeting.
* Agree a mental health Individual Care Plan including clear next steps.
* Discuss how the parents and carers can support their child.
* Keep parents and carers up to date and fully informed of decisions about the support and interventions provided.

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 give children the option of informing their parents and carers about their mental health needs for themselves or of accompanying and supporting them to do so.

**Involving children**

Every year we train up a group of children as our Wellbeing Warriors, who lead on whole school campaigns on health and wellbeing. 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.

**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 Lead is a qualified ‘mental health first aider’ and a number of our staff have completed the one day course on mental health first aid.

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Appendices

Appendix 1 Protective and Risk factors (adapted from Mental Health and Behaviour DfE March 2016)

Risk Factors

* Genetic influences
* Specific development delay
* Communication difficulties
* Physical illness
* Academic failure
* Low self-esteem
* SEND
* Being female (in younger children)
* Overt parental conflict including domestic violence
* Family breakdown (including where children are taken into care or adopted)
* Inconsistent or unclear discipline
* Hostile and rejecting relationships
* Failure to adapt to a child’s changing needs
* Physical, sexual, emotional abuse or neglect
* Parental psychiatric illness
* Parental criminality, alcoholism or personality disorder
* Death and loss – including loss of friendship
* Bullying
* Discrimination
* Breakdown in or lack of positive friendships
* Negative peer influences
* Peer pressure
* Socio-economic disadvantage
* Homelessness
* Disaster, accidents, war or other overwhelming events
* Discrimination
* Other significant life events

Protective Factors

* Secure attachment experience
* Good communication skills
* Faith or spirituality
* Sociable
* Clear, consistent discipline
* Support for education
* At least one good parent-child relationship
* Clear policies on behaviour and bullying
* ‘Open door’ policy for children to raise problems
* A whole-school approach to promoting good mental health
* Wider supportive network
* Good housing
* High standard of living
* High morale school with positive policies for behaviour, attitudes and anti-bullying
* Opportunities for valued social roles
* Range of sport/leisure activities
* Posiitve peer relationhips

Appendix 2 Specific mental health needs most commonly seen in school-aged children

For information see Annex C Main Types of Mental Health Needs Mental Health and Behaviour in School DfE March 2016 https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2

Annex C includes definitions, signs and symptoms and suggested interventions for

* Anxiety (including panic attacks, phobias and Obsessive Compulsive Disorder OCD)
* Depression
* Eating Disorders
* Substance Misuse
* Self Harm

Appendix 3 Where to get information and support

For support on specific mental health needs Anxiety UK www.anxietyuk.org.uk OCD UK [www.ocduk.org](http://www.ocduk.org)

Depression Alliance www.depressoinalliance.org

Eating Disorders www.b-eat.co.uk and www.inourhands.com

National Self-Harm Network www.nshn.co.uk [www.selfharm.co.uk](http://www.selfharm.co.uk)

Suicidal thoughts Prevention of young suicide UK – PAPYRUS: www.papyrus-uk.org

For general information and support www.youngminds.org.uk champions young people’s mental health and wellbeing www.mind.org.uk advice and support on mental health problems www.minded.org.uk (e-learning) www.time-to-change.org.uk tackles the stigma of mental health www.rethink.org challenges attitudes towards mental health