



# Positive Mental Health & Well-being Policy 2022-23

This report should be read in conjunction with other policies:-

- Keeping Children Safe in Education Sept 2022
- Mental health and Behaviour in Schools March 2016
- Safeguarding Policy
- CONNECT (PSHE) Policy

Staff Member(s) Responsible:	CBY
Date:	01/09/2022
Review Date:	01/09/2023



## **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 Alleyne's we aim to promote positive mental health for every member of our staff and student body. 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. In an average classroom, three children will 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 students affected both directly, and indirectly by mental ill health.

This document describes the school's approach to promoting positive mental health and wellbeing. This policy is intended as guidance for all staff including non-teaching staff and governors.

## **Policy Aims**

- Promote positive mental health in all staff and students
- 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 young people with mental health issues
- Provide support to students 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 students. Staff with a specific, relevant remit include:

#### Mr C.Bailey – Mental Health Lead ( <a href="mailto:c.bailey@alleynes.staffs.sch.uk">c.bailey@alleynes.staffs.sch.uk</a>)

Ms Lockett – Deputy Safeguarding Lead ( office@alleynes.staffs.sch.uk )

Mr Tweats – Deputy Safegaurding Lead ( t.tweats@alleynes.staffs.sch.uk )

Mrs Powell - Year 9 Head of Progress & Support ( c.powell@alleynes.staffs.sch.uk )

Mr Blake – Year 10 Head of Progress & Support ( k.blake@alleynes.staffs.sch.uk )

Mrs Broadist – Year 11 Head of Progress & Support ( h.broadist@alleynes.staffs.sch.uk )



Mrs Umerah – Head of CONNECT (PSHE) ( <a href="mailto:r.umerah@alleynes.staffs.sch.uk">r.umerah@alleynes.staffs.sch.uk</a>)
Mrs Bailey – Attendance & Welfare Officer ( <a href="mailto:e.bailey@alleynes.staffs.sch.uk">e.bailey@alleynes.staffs.sch.uk</a>)
Mrs Page – HOPE Project Coach/Mentor ( <a href="mailto:j.page@alleynes.staffs.sch.uk">j.page@alleynes.staffs.sch.uk</a>)
Mrs S Barnett – Coach / Mentor (<a href="mailto:s.barnett@alleynes.staffs.sch.uk">s.barnett@alleynes.staffs.sch.uk</a>)

Any member of staff who is concerned about the mental health or wellbeing of a student 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 officer or the headteacher. If the student 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 Mr Bailey, mental health lead.

## **Support for Students**

Alleyne's academy prides itself in providing support for all students who are suffering from mental health issues. Some of the current strategies and interventions include;

- The HOPE project
- School nurse
- Staff mentor/coach
- Sixth Form Buddy
- The WHAM Plan (CAMHS)
- The Dove Service (Bereavement)

Please contact the Mental Health Lead, Mr Bailey (<u>c.bailey@alleynes.staffs.sch.uk</u>) if you require any further information on the above.

All students have regular opportunities to discuss ongoing matters, mental health-based or otherwise with their Head/ Assistant Head of Progress & Support or form tutor.

#### **Individual Care Plans**

It is helpful to draw up an individual care plan (where appropriate) for pupils causing concern or who receive a **diagnosis** pertaining to their mental health. This should be drawn up involving the pupil, the parents/carers 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

## **Teaching about Mental Health**

The skills, knowledge and understanding needed by our students to keep themselves and others physically and mentally healthy and safe are included as part of our developmental **CONNECT (PSHE) Curriculum**.

External speakers/ organisations are frequently invited into school speak to students during assemblies and to run group workshops.

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 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.

#### **Signposting**

We will ensure that staff, students and parents/carers 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 is outlined in **Appendix C**.

We will display relevant sources of support in communal areas such as the reception area and tutor rooms and will regularly highlight sources of support to students within relevant parts of the curriculum.

Termly safeguarding newsletters are posted on the school's website, which can often refer to mental health topics.

Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring students understand:

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



## **Warning Signs**

School staff may become aware of warning signs which indicate a student 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 Mr Bailey, our mental health and emotional wellbeing lead.

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 secretively
- Lateness to or absence from school
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

## **Managing disclosures**

A student 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 student 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 rather than of exploring 'Why?'.

All disclosures should be recorded in writing on a 'serious concern form' and held on the student'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 mental health lead, Mr Bailey who will provide store the record appropriately and offer support and advice about next steps.



## Confidentiality

We should be honest with regards to the issue of confidentiality. If we it is necessary for us to pass our concerns about a student 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 student 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/carer.

It is always advisable to share disclosures with a colleague, usually the mental health lead, Mr Bailey this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the student, it ensures continuity of care in our absence and it provides an extra source of ideas and support. We should explain this to the student and discuss with them who it would be most appropriate and helpful to share this information with.

## **Working with Parents/Carers**

Where it is deemed appropriate to inform parents/carers, we need to be sensitive in our approach. Before disclosing to parents/carers 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/carers, the student, other members of staff.
- What are the aims of the meeting?

It can be shocking and upsetting for parents/carers to learn of their child's issues and many may respond with anger, fear or upset during the first conversation. We should be accepting of this (within reason) and give the parent/carer time to reflect.

We should always highlight further sources of information and give them leaflets to take away where possible as they will often find it hard to take much in whilst coming to terms with the news that you're sharing. Sharing sources of further support aimed specifically at parents/carers 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/carers 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.



## **Working with all Parents/Carers**

Parents/carers 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/carers we will:

- Highlight sources of information and support about common mental health issues on our school website
- Ensure that all parents/carers 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/carers
- Share ideas about how parents/carers can support positive mental health in their children through our regular information evenings
- Keep parents informed about the mental health topics their children are learning about in the CONNECT (PSHE) curriculum and share ideas for extending and exploring this learning at home.
- Provide opportunities for parents/carers to support one another and share good practice (HOPE Peer Mentoring).

## **Supporting Peers**

When a student is suffering from mental health issues, it can be a difficult time for their friends. Friends often want to support but do not 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 settings and will be guided by conversations by the student 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 training about recognising and responding to mental health issues as part of their regular safeguarding training in order to enable them to keep students safe.



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 students.

Suggestions for individual, group or whole school CPD should be discussed with Mrs Farnsworth (<u>r.farnsworth@alleynes.staffs.sch.uk</u>), our CPD Coordinator who can also highlight sources of relevant training and support for individuals as needed.

#### **Policy Review**

This policy will be reviewed annually. It is next due for review in **September 2023**.

Additionally, this policy will be reviewed and updated as appropriate on an ad hoc basis. If you have a question or suggestion about improving this policy, this should be addressed to Mr C. Bailey our safeguarding / mental health lead via phone 01785 337400 or email c.bailey@alleynes.staffs.sch.uk.



## Appendix A: Further information and sources of support about common mental health issues

## **Prevalence of Mental Health and Emotional Wellbeing Issues**

- 1 in 10 children and young people aged 5 16 suffer from a diagnosable mental health disorder that is around three children in every class.
- Between 1 in every 12 and 1 in 15 children and young people deliberately self-harm.
- There has been a big increase in the number of young people being admitted to hospital because of self-harm. Over the last ten years this figure has increased by 68%.
- More than half of all adults with mental health problems were diagnosed in childhood. Less than half were treated appropriately at the time.
- Nearly 80,000 children and young people suffer from severe depression.
- The number of young people aged 15-16 with depression nearly doubled between the 1980s and the 2000s.
- Over 8,000 children aged under 10 years old suffer from severe depression.
- 3.3% or about 290,000 children and young people have an anxiety disorder.
- 72% of children in care have behavioural or emotional problems these are some of the most vulnerable people in our society.

Below, we have sign-posted information and guidance about the issues most commonly seen in school-aged children. The links will take you through to the most relevant page of the listed website. Some pages are aimed primarily at parents/carers but they are listed here because we think they are useful for school staff too.

Support on all of these issues can be accessed via **Young Minds** ( <u>www.youngminds.org.uk</u> ), **Mind** ( <u>www.mind.org.uk</u> ) and (for e-learning opportunities) **Minded** ( <u>www.minded.org.uk</u> ).

#### Self-harm

Self-harm describes any behaviour where a young person causes harm to themselves in order to cope with thoughts, feelings or experiences they are not able to manage in any other way. It most frequently takes the form of cutting, burning or non-lethal overdoses in adolescents, while younger children and young people with special needs are more likely to pick or scratch at wounds, pull out their hair or bang or bruise themselves.

#### **Online Support**

SelfHarm: www.selfharm.co.uk

National Self-Harm Network: <u>www.nshn.co.uk</u>



#### **Books**

- Pooky Knightsmith (2015) Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies. London: Jessica Kingsley Publishers
- Keith Hawton and Karen Rodham (2006) By Their Own Young Hand: Deliberate Selfharm and Suicidal Ideas in Adolescents. London: Jessica Kingsley Publishers
- Carol Fitzpatrick (2012) A Short Introduction to Understanding and Supporting Children and Young People Who Self-Harm. London: Jessica Kingsley Publishers

#### **Depression**

Ups and downs are a normal part of life for all of us, but for someone who is suffering from depression these ups and downs may be more extreme. Feelings of failure, hopelessness, numbness or sadness may invade their day-to-day life over an extended period of weeks or months, and have a significant impact on their behaviour and ability and motivation to engage in day-to-day activities.

## **Online Support**

Depression Alliance: <a href="https://www.depressionalliance.org/information/what-depression">www.depressionalliance.org/information/what-depression</a>

#### **Books**

 Christopher Dowrick and Susan Martin (2015) Can I Tell you about Depression?: A guide for friends, family and professionals. London: Jessica Kingsley Publishers

#### **Anxiety, Panic Attacks and Phobias**

Anxiety can take many forms in children and young people, and it is something that each of us experiences at low levels as part of normal life. When thoughts of anxiety, fear or panic are repeatedly present over several weeks or months and/or they are beginning to impact on a young person's ability to access or enjoy day-to-day life, intervention is needed.

#### **Online Support**

Anxiety UK: www.anxietyuk.org.uk

#### **Books**

- Lucy Willetts and Polly Waite (2014) Can I Tell you about Anxiety?: A guide for friends, family and professionals. London: Jessica Kingsley Publishers
- Carol Fitzpatrick (2015) A Short Introduction to Helping Young People Manage Anxiety.
   London: Jessica Kingsley Publishers



## **Obsessions and Compulsions**

Obsessions describe intrusive thoughts or feelings that enter our minds which are disturbing or upsetting; compulsions are the behaviours we carry out in order to manage those thoughts or feelings. For example, a young person may be constantly worried that their house will burn down if they don't turn off all switches before leaving the house. They may respond to these thoughts by repeatedly checking switches, perhaps returning home several times to do so. Obsessive compulsive disorder (OCD) can take many forms — it is not just about cleaning and checking.

## **Online support**

OCD UK: www.ocduk.org/ocd

#### **Books**

- Amita Jassi and Sarah Hull (2013) Can I Tell you about OCD?: A guide for friends, family and professionals. London: Jessica Kingsley Publishers
- Susan Conners (2011) The Tourette Syndrome & OCD Checklist: A practical reference for parents and teachers. San Francisco: Jossey-Bass

## **Suicidal Feelings**

Young people may experience complicated thoughts and feelings about wanting to end their own lives. Some young people never act on these feelings though they may openly discuss and explore them, while other young people die suddenly from suicide apparently out of the blue.

#### **Online support**

Prevention of young suicide UK – PAPYRUS: <a href="www.papyrus-uk.org">www.papyrus-uk.org</a>
On the edge: ChildLine spotlight report on suicide: <a href="www.nspcc.org.uk/preventing-abuse/research-and-resources/on-the-edge-childline-spotlight/">www.nspcc.org.uk/preventing-abuse/research-and-resources/on-the-edge-childline-spotlight/</a>

#### **Books**

- Keith Hawton and Karen Rodham (2006) By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents. London: Jessica Kingsley Publishers
- Terri A.Erbacher, Jonathan B. Singer and Scott Poland (2015) Suicide in Schools: A Practitioner's Guide to Multi-level Prevention, Assessment, Intervention, and Postvention. New York: Routledge

## **Eating problems**

Food, weight and shape may be used as a way of coping with, or communicating about, difficult thoughts, feelings and behaviours that a young person experiences day to day. Some young



people develop eating disorders such as anorexia (where food intake is restricted), binge eating disorder and bulimia nervosa (a cycle of bingeing and purging). Other young people, particularly those of primary or preschool age, may develop problematic behaviours around food including refusing to eat in certain situations or with certain people. This can be a way of communicating messages the child does not have the words to convey.

## **Online support**

Beat – the eating disorders charity: <a href="www.b-eat.co.uk/about-eating-disorders">www.b-eat.co.uk/about-eating-disorders</a>
Eating Difficulties in Younger Children and when to worry: <a href="www.inourhands.com/eating-difficulties-in-younger-children">www.inourhands.com/eating-difficulties-in-younger-children</a>

#### **Books**

- Bryan Lask and Lucy Watson (2014) Can I tell you about Eating Disorders?: A Guide for Friends, Family and Professionals. London: Jessica Kingsley Publishers
- Pooky Knightsmith (2015) Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies. London: Jessica Kingsley Publishers
- Pooky Knightsmith (2012) Eating Disorders Pocketbook. Teachers' Pocketbooks



## **Appendix B: Guidance and Advice Documents**

- Keeping Children Safe in Education (Department for Education, 2022) Statutory guidance for schools.
  - https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment data/file/1101454/Keeping children safe in education 2022.pdf
- Working Together to Safeguard Children (Department for Education, 2018) –
   Statutory guidance for schools.
  - https://www.gov.uk/government/publications/working-together-to-safeguard-children--2
- Mental Health and Behaviours in Schools (Department for Education, 2016) –
   Guidance for schools. <a href="https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2">https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2</a>



## **Appendix B: Local Support**

#### Children

Child & Adolescent Mental Health Service (CAMHS) – Stafford

Tel: (01785) 221665

www.youngminds.org.uk

Young Mind – Stafford and District

Tel: (01785) 283440

www.nsmind.org.uk

■ The Dove Service – Bereavement & Loss Counselling – Staffordshire

Tel: (01782) 683155

www.thedoveservice.org.uk

Utopia – Psychotherapy and Counselling Service – Newcastle & Stafford

Tel: (01782) 692807

www.utopiapsychology.co.uk

■ Families' Health & Wellbeing Service (0-19) – Stoke & Staffordshire NHS Trust

Tel: 0300 3033923

www.staffordshireandstokeontrent.nhs.uk/services/0-19

## **Parents/ Carers**

Starfish Health & Wellbeing Service – Staffordshire

Tel: (01543) 572161

www.starfishhealthandwellbeing.co.uk

North Staffordshire Wellbeing Service (16+)

Tel: (01782) 711651



#### www.northstaffswellbeing.co.uk

Young Mind – Stafford and District

Tel: (01785) 283440

www.nsmind.org.uk

CTC Healthcare – Physiotherapy and Wellbeing Service – Stafford

Tel: (01270) 361363

www.ctchealthcare.co.uk

■ Changes – Health & Wellbeing – Staffordshire

Tel: (01782) 411433

www.changes.org.uk

Staffordshire Council of Voluntary Youth Services (SCVYS)

Tel: (01785) 240378

www.staffscvys.org.uk



