

Mental Health and Wellbeing Policy



Mission statement

At Emmanuel Church of England Primary School, broad opportunities are provided for individuals to develop their full potential and allow them to be healthy, happy and secure.

Building on our Christian ethos, and in partnership with the whole school community, we provide a stimulating and caring environment where individuals are valued and nurtured morally, spiritually and academically. We stress the fundamental principle;

“Always treat others as you would like them to treat you” as Jesus said in Matthew 7:12

Why mental health and wellbeing is important

At our school, we aim to promote positive mental health and wellbeing for our whole-school community; pupils, staff, parents and carers, and recognise how important mental health and emotional wellbeing is to our lives in just the same way as physical health. We recognise that children’s mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. All children go through ups and downs through their school career/life and some face significant life events:

- 92% of young people will experience a significant bereavement before the age of 16 years (Child Bereavement UK).
- 1 in 8 children and young people have a diagnosable mental health problem, and many continue to have these problems into adulthood (Place2be).
- In a survey by the World Health Organisation, they found that over 70% of those responded had experienced a traumatic event. Studies and research spanning over twenty years have shown that the more of these ACEs a child endures, the greater the risk of having physical and mental health problems later in life.
- The Crime Survey for England and Wales (CSEW) estimated that one in five adults aged 18 to 74 years experienced at least one form of child abuse, whether emotional abuse, physical abuse, sexual abuse, or witnessing domestic violence or abuse, before the age of 16 years (8.5 million people) (ONS 2019).

Traumatic events such as shown in these statistics can have an enormous impact on their quality of life, relationships and academic achievement. In many cases, it is life limiting.

The Department for Education (DfE) recognises that: “in order to help their pupils succeed; schools have a role to play in supporting them to be resilient and mentally healthy”.

Schools can be a place for children and young people to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience. For some, school will be a place of respite from difficult home lives and offer positive role models and relationships, which are critical in promoting pupils wellbeing and can help engender a sense of belonging and community.

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Our role in school is to ensure that pupils are able to manage their emotions and cope in times of change and stress, be resilient, are supported to reach their potential and access help when they need it. We also have a role to ensure that pupils learn about what they can do to maintain positive mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues and where they can go if they need help and support. Our aim is to help develop the protective factors that build resilience to mental health problems and be a school where:

- All pupils are valued
- Pupils have a sense of belonging and feel safe
- Pupils feel able to talk openly with trusted adults about their problems without feeling any stigma
- Positive mental health is promoted and valued
- Bullying is not tolerated

In addition to children's wellbeing, we recognise the importance of promoting staff mental health and wellbeing.

Purpose of the policy

This policy sets out:

- How we promote positive mental health
- How we prevent mental health problems
- How we identify and support pupils with mental health needs
- How we train and support all staff to understand mental health issues and spot early warning signs to help prevent mental health problems getting worse and support pupils
- Key information about some common mental health problems
- Where parents, staff and pupils can get advice and support

Definition of mental health and wellbeing

We use the World Health Organisation's definition of mental health and wellbeing "*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*".

Mental health and wellbeing is not just the absence of mental health problems. We want all children/young people to:

- Feel confident in themselves
- Be able to express a range of emotions appropriately
- Be able to make and maintain positive relationships with others
- Cope with the stresses of everyday life
- Manage times of stress and be able to deal with change
- Learn and achieve

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How the policy was developed

The development of this policy was led by our Mental Health lead and Inclusion Leader in consultation with pupils, staff, parents and carers, the school nurse and local mental health professionals (Child and Adolescent Mental Health Service (CAMHS) and Educational Psychologists. We used the Camden example policy as the basis of our policy.

In developing this policy we have taken account of:

- Children and Young People's mental health: state of the nation 2016
- Education, Education, Education, Mental health 2016 (secondary)
- Promoting children and young people's emotional health and wellbeing Public Health England 2015
- Preparing to teach about mental health PSHE Association 2015
- Mental Health and Behaviour in schools DfE 2014
- Supporting pupils with medical conditions DfE 2014

Links to other policies

This policy links to our policies on safeguarding, supporting pupils with medical conditions, anti-bullying, PSHE and SEND strategy. It also links to our SEN Information Report. Links with the behaviour policy are especially important because behaviour, whether it is disruptive, withdrawn, anxious, depressed or otherwise, may be related to an unmet mental health need.

A whole school approach to promoting positive mental health

We take a whole-school approach to promoting positive mental health that aims to help pupils become more resilient, be happy, successful and prevent problems before they arise. This encompasses 7 aspects:

1. Creating an ethos, policies and behaviours that support mental health and resilience that everyone understands.
2. Helping pupils to develop social relationships, support each other and seek help when needed.
3. Helping pupils to be resilient learners.
4. Teaching pupils social and emotional skills and an awareness of mental health.
5. Early identification of pupils who have mental health needs and planning support to meet their needs, including working with specialist services.
6. Effectively working with parents and carers.
7. Supporting and training staff to develop their skills and resilience.

We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues and aim to create an open and positive culture that encourages discussion and understanding of mental health issues.

Roles and Responsibilities

Staff

We believe that all staff have a responsibility to promote positive mental health, and to understand 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 pupils with mental health needs get early intervention and the support they need.

All staff understand possible risk factors that might make some children more likely to experience problems; such as a 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 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 (*see appendix 1 on risk and protective factors*).

Mental Health Lead (School ELSA)

- Leads on and works with other staff to coordinate whole-school activities to promote positive mental health.
- Provides advice and support to staff and organises training and updates.
- Keeps staff up-to-date with information about what support is available.
- Liaises with the PSHE Coordinator on teaching about mental health.
- Is the first point of contact and communicates with mental health services.
- Leads on and makes referrals to services.

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 pupils with mental health needs and their families. Support includes:

- Safeguarding/Child Protection Lead
- Support staff to manage mental health needs of pupils
- Inclusion Leader who helps staff understand their responsibilities to children with special educational needs and disabilities (SEND), including pupils whose mental health problems mean they need special educational provision.
- ELSA
- Our family support/home school link worker/parent support advisor supports families and leads mindfulness sessions for pupils
- School nurse
- Camden Educational Psychologist

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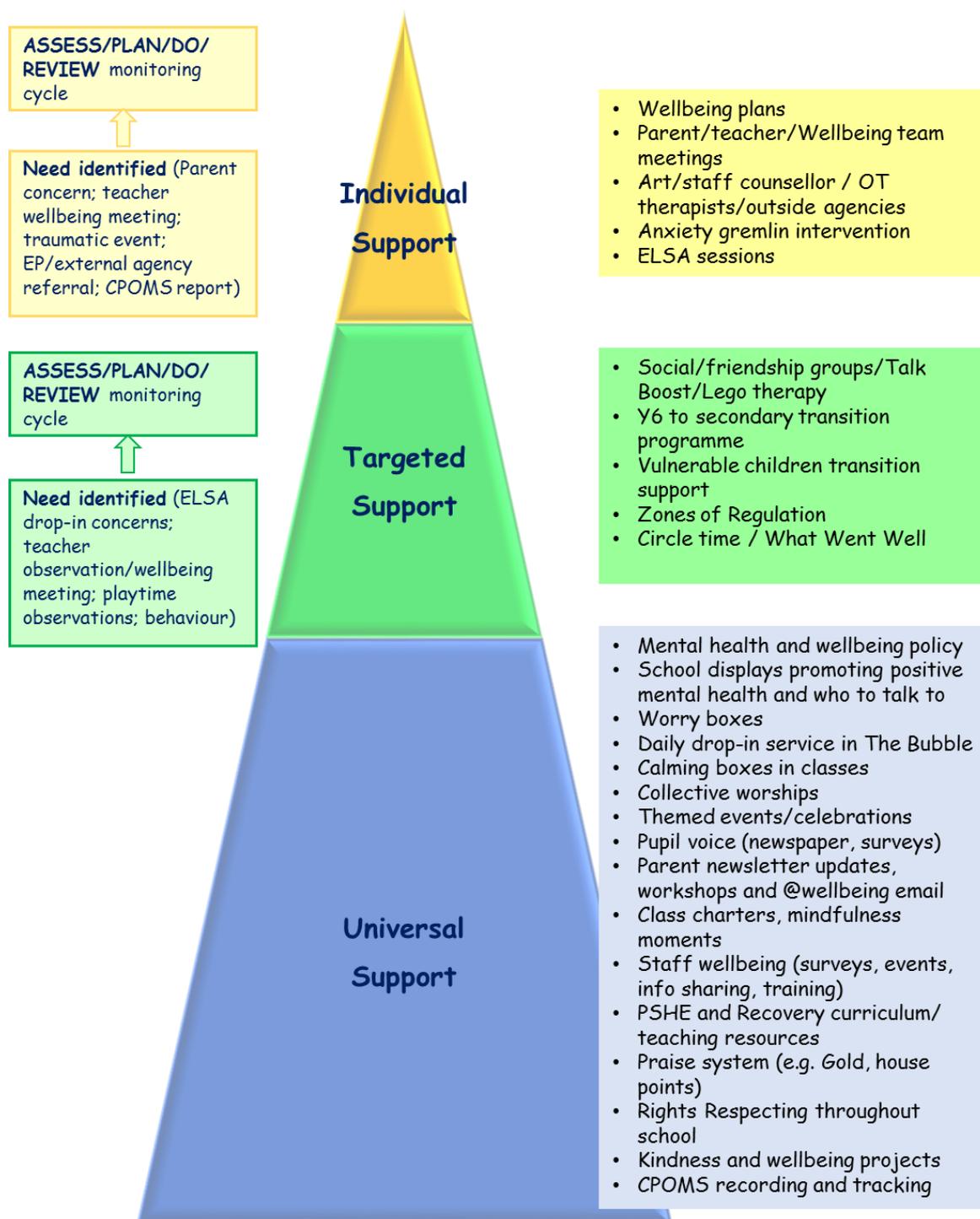


- Psychotherapist from Camden's CAMHS who provides therapy and group work to pupils who are referred and support staff to manage mental health needs of pupils-support can be offered in school or at an external agency

Supporting pupils' positive mental health

We believe we have a key role in promoting pupils' positive mental health and helping to prevent mental health problems. Our school has developed a range of strategies and approaches using a tiered approach of universal, targeted and individual support;

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We also take opportunities to investigate new evidence-based approaches e.g. Take Ten

Teaching about mental health and emotional wellbeing

Through PSHE we teach the knowledge and social and emotional skills that will help pupils to be more resilient, understand about mental health and help reduce the stigma of mental health problems.

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Primary pupils learn

EYFS

- To begin to recognise and name one or two feelings including good and not so good feelings
- How to calm down
- How their behaviour affects other people
- Begin to learn about empathy and understanding other people's feelings
- 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 how to play in a friendly, inclusive and helpful way
- To understand importance of sharing – both with their possessions and friendships

Key Stage 1

- 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
- 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

- What positively and negatively affects their mental and emotional health (including the media)
- 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

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- 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), how to respond and ask for help
- About the importance of talking to someone and how to get help

Identifying, referring and supporting pupils with mental health needs

Our approach is to:

- Provide a safe environment to enable pupils to express themselves and be listened to
- Ensure the welfare and safety of pupils as paramount
- Identify appropriate support for pupils based on their needs
- Involve parents and carers when their child needs support
- Involve pupils in the care and support they have
- Monitor, review and evaluate the support with pupils 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:

- Using pupil voice questionnaire and wellbeing surveys to identify individuals that might need support
- Analysing behaviour, exclusions, visits to the medical room/school nurse, attendance and sanctions
- Using Leuven scales to identify children in EYFS who need support
- Staff report concerns about individual pupils to the Mental Health Lead/ Inclusion Leader
- Teachers and wellbeing team meet to identify children who show potential mental health indicators to discuss how these children are best supported in school
- Worry boxes in each class for pupils to raise concerns which are checked by the ELSA or class teachers daily (these can be named or anonymous but give an indication of needs in a particular class regularly)
- Enabling pupils to raise concerns or self-refer through daily drop-in sessions at lunch time with school ELSA
- A parental information and health questionnaire on entry
- Gathering information from a previous school at transfer or transition
- Enabling parents and carers to raise concerns through the class teacher or directly to the Mental Health Lead/ Inclusion Leader
- Using pupil wellbeing questionnaires to identify concerns
- All wellbeing concerns are recorded and tracked through the CPOMS tool to ensure fast communication between staff

Teaching 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

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problems. Any member of staff concerned about a pupil will take this seriously and talk to the Mental Health Lead.

These signs might include:

- Isolation from friends and family and becoming socially withdrawn
- Changes in activity or mood or eating/sleeping habits
- Lowering academic achievement
- Talking or joking about self-harm or suicide
- Expressing feelings of failure, uselessness or loss of hope
- Secretive behaviour
- An increase in lateness or absenteeism
- Not wanting to do PE or get changed for PE
- Wearing long sleeves in hot weather
- Drugs or alcohol misuse
- Physical signs of harm that are repeated or appear non-accidental
- Repeated physical pain or nausea with no evident cause

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.

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 pupils 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.

Need The level of need is based on discussions at the regular Inclusion meetings/panel with key members of staff	Evidence-based Intervention and Support -the kinds of intervention and support provided will be decided in consultation with key members of staff, parents and pupils <i>For example</i>	Monitoring / Review
Highest need	<ul style="list-style-type: none"> • CAMHS-assessment, 1:1 or family support or 	All pupils needing targeted individualised support will

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	<p>treatment, consultation with school staff and other agencies</p> <ul style="list-style-type: none"> • ELSA Support • External agency support • Other interventions e.g. art therapy • 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. 	<p>have an Individual Well-being plan- drawn up setting out</p> <ul style="list-style-type: none"> • The needs of the pupils • How the pupil will be supported • Actions to provide that support • Any special requirements <p>Pupils and parents/carers will be involved in the plan. The plan and interventions are monitored, reviewed and evaluated to assess the impact.</p> <p>The Wellbeing Plan is overseen by the Mental Health Lead.</p>
Some need	<ul style="list-style-type: none"> • Access to school ELSA • 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	<ul style="list-style-type: none"> • General support • time to talk drop in • class teacher/TA • Worry box 	

Pupils are informed that the mental health lead is available when a pupil is dissatisfied with the level of care and support.

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Support for friends

We recognise that when a pupil is experiencing mental health problems, it can be challenging for their friends, who often want to help them but are not sure the best thing to do and can also be emotionally affected. In the case of eating disorders and self-harm, it is possible that friends may learn unhealthy coping strategies from each other, and we will consider on a case-by-case basis what support might be appropriate including one to one and group support.

We will involve the pupil who is suffering and their parents and consider what is helpful for friends to know and what they should not be told, how they can best support, things they should avoid doing/saying which may inadvertently cause upset and warning signs that their friend needs help

We will also make information available about where and how to access information and support for themselves and healthy ways of coping with the difficult emotions they may be feeling.

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

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

We have access to a range of specialist services and during the support will have regular contact with the service to review the support and consider next steps, as part of monitoring the pupils' Individual Care Plan.

School referrals to a specialist service will be made by the Mental Health Lead/Inclusion Leader 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.

Specialist Service	Referral process
Child and Adolescent Mental Health Service (CAMHS)	Accessed through school, GP or self-referral
School Counsellor	Accessed through the Mental Health Lead/Inclusion Leader
Educational Psychologist	Accessed through the Inclusion Leader

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SEND and mental health

Persistent mental health problems may lead to pupils 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)

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 their children with 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 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.

To support parents and carers:

- We regularly provide information and websites on mental health issues and local wellbeing and parenting programmes, which can be accessed on the school website. 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 host parent workshops, alongside outside professionals, to provide more in-depth information on subjects such as body image, anxiety, etc
- We include the mental health topics that are taught in the PSHE curriculum, on the school website

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 help 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 most case parents and carers will be involved in their children's interventions, although there may be circumstances when this may not happen, such as child protection issues.
- Offer information to take away and places to seek further information
- Be available for follow up calls
- Make a record of the meeting
- Where necessary, agree an Individual Wellbeing Plan together with information on how best to the child.

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- Keep parents and carers up to date and fully informed of decisions about the support and interventions

Parents and carers will always be informed if their child is at risk of danger and pupils may choose to tell their parents and carers themselves. We give pupils the option of informing their parents and carers about their mental health need for themselves or go along with them.

We make every effort to support parents and carers to access services where appropriate. Our primary concern are pupils, and in the rare event that parents and carers are not accessing services we will seek advice from the Local Authority. We also provide information for parents and carers to access support for their own mental health needs.

Involving pupils

We seek pupil's views about our approach, curriculum and promoting whole school mental health activities.

We always seek feedback from pupils who have had support to help improve that support and the services they received.

Supporting staff mental health and training

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 pupils and know what to do and where to get help (see Appendix 3). Some teaching staff have completed the national Mental Health First Aid training.

Those staff with a specific responsibility have more specialised training and where possible access to supervision from mental health professionals

Supporting and promoting the mental health and wellbeing of staff is an essential component of a healthy school and we promote opportunities to maintain a healthy work life balance and wellbeing, such as yoga, mindfulness, and physical activities.

Staff questionnaires are used to help identify concerns and opportunities to improve our staff wellbeing provision. Staff also have access to Camden's counselling service and are offered time with our in-school counsellor. We also use different mediums and social events to help ensure members of staff feel connected and recognised as part of the team.

At Emmanuel, all staff have access to the following to support our wellbeing if needed:

- Time with our school counsellor and reminders about access to the Camden counselling service
- Regular meetings or drop in times with SLT, half-termly meeting with key stage leaders and opportunities to meet and discuss concerns with their line manager

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- Training, including INSET days, support staff meetings, access to weekly 'Lunch and Learn' webinars
- Wellbeing breakfasts every term and end of term social events
- Weekly 'coffee and chat' and opportunity to discuss children's or their own needs with the Mental Health Lead
- Free tea/coffee/milk in the staff room
- Areas dedicated for the staff to take time out to relax and have lunch such as staff room and the Sanctuary Wellbeing room in EYFS building
- Wellbeing day
- Fortnightly information updates on mental health and wellbeing
- Staff noticeboard and 'shout out' board to share information and to recognise each other
- Buddy scheme for new staff
- Opportunity to discuss wellbeing in performance reviews twice a year

Monitoring and Evaluation

The mental health and wellbeing policy is on the school website and hard copies are available to parents and carers from the school office. All mental health professionals are given a copy before they begin working with the school as well as external agencies involved in our mental health work.

Policy reviewed	February 2021
Agreed review schedule	3 yearly
Next review due	February 2024

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Appendix 1 Protective and Risk factors

(adapted from Mental Health and Behaviour DfE March 2016)

	Risk Factors	Protective Factors
In the Child	<ul style="list-style-type: none"> • Genetic influences • Specific development delay • Communication difficulties • Physical illness • Academic failure • Low self-esteem • SEND 	<ul style="list-style-type: none"> • Being female (in younger children) • Secure attachment experience • Outgoing temperament as an infant • Good communication skills, sociability • Being a planner and having a belief in control • Humour • Problem solving skills and a positive attitude • Experiences of success and achievement • Faith or spirituality • Capacity to reflect
In the Family	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • At least one good parent-child relationship (or one supportive adult) • Affection • Clear, consistent discipline • Support for education • Supportive long term relationship or the absence of severe discord
In the School	<ul style="list-style-type: none"> • Bullying • Discrimination • Breakdown in or lack of positive friendships • Negative peer influences 	<ul style="list-style-type: none"> • Clear policies on behaviour and bullying • 'Open door' policy for children to raise problems • A whole-school approach to promoting good mental health

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	<ul style="list-style-type: none"> • Peer pressure • Poor pupil to teacher relationships 	<ul style="list-style-type: none"> • Positive classroom management • A sense of belonging • Positive peer influences
In the Community	<ul style="list-style-type: none"> • Socio-economic disadvantage • Homelessness • Disaster, accidents, war or other overwhelming events • Discrimination • Other significant life events 	<ul style="list-style-type: none"> • 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

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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

The DfE guide does not include specific information on suicidal thought

Suicidal Thoughts

Young people may experience thoughts and feelings about wanting to end their lives. Some young people never act on these feelings but may openly discuss and explore them, while other young people die suddenly from suicide without any apparent warning signs.

