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# **Sutton Veny Cof E School Mental Health and Emotional Wellbeing Policy**

At Sutton Veny School, we are committed to promoting positive mental health and emotional wellbeing to all children, their families/carers and members of staff and governors. Our open culture allows pupil’s voices to be heard, and through the use of effective policies and procedures we ensure a safe and supportive environment for all affected - both directly and indirectly - by mental health issues.

**Aims :**

* To promote positive mental health and emotional wellbeing in all staff and children.
* Increase understanding and awareness of common mental health issues.
* Enable staff to identify and respond to early warning signs of mental ill health in children.
* Enable staff to understand how and when to access support when working with young people with mental health issues.
* Provide the right support to children with mental health issues, and know where to signpost them and their parents/carers for specific support.
* Develop resilience amongst children and raise awareness of resilience building techniques.
* Raise awareness amongst all staff, that staff may have mental health issues and that they are supported in relation to looking after their wellbeing
* Instill a culture of staff and pupil welfare where everyone is aware of signs and symptoms with effective signposting underpinned by behaviour and welfare around school.

# **Key staff members**

This policy aims to ensure all staff take responsibility to promote the mental health of children, however key members of staff have specific roles to play:

* Pastoral Staff /ELSA
* Designated Safeguarding Lead
* SENCO
* PSHE Coordinator

If a member of staff is concerned about the mental health or wellbeing of pupil, in the first instance they should speak to the head-teacher. If there is a concern that the pupil is high risk or in danger of immediate harm, the school’s child protection procedures should be followed. If the child presents a high risk medical emergency, relevant procedures should be followed, including involving the emergency services if necessary.

# **Teaching about mental health**

The skills, knowledge and understanding our children need to keep themselves - and others - physically and mentally healthy and safe are included as part of our PSHE curriculum.

We follow the statutory guidance issued in 2020 by the DfE: <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/908013/Relationships_Education__Relationships_and_Sex_Education__RSE__and_Health_Education.pdf> ‘Teaching about mental wellbeing is central; especially as a priority for parents is their children’s happiness. We know that children and young people are increasingly experiencing challenges, and that young people are at particular risk of feeling lonely.’

Incorporating this into our curriculum at all stages is a good opportunity to promote children’s wellbeing through the development of healthy coping strategies and an understanding of children’ own emotions as well as those of other people.

# **Signposting**

We will ensure that staff, children and parents/carers are aware of the support and services available to them, and how they can access these services. Within the school (for example NSPCC posters for children, class worry boxes etc) and through our communication channels (newsletter and website), we will share and display relevant information about local and national support services and events. We have a dedicated Mental health and well-being page on our school website to help parents and carers with information; both about their children and for themselves.

# **Sources of support at school and in the local community**

* **ELSA guided support**- 6 week block; referred by family/carer or staff member. (This may also include art therapy).
* **Barnardo’s counselling**- 6 week block; referred by school.
* **Barnardo’s Decider skills** course-6 week block to develop resilience skills; referred by school.
* Informal **staff member support**-adult in school linked to child to offer ‘as and when needed’ support.
* **Early support assessments**-whole family support and intervention. Led by DSL and supported by early help and intervention team.
* **CAMHS partnership**, a group of providers specialising in children and young people’s mental health wellbeing. This may also involve the school nursing team.

# **Warning Signs**

We have systems for identifying mental health problems and action for if a child presents with mental health concerns relating to safeguarding.

Staff may become aware of warning signs which indicate a pupil 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 alert the head-teacher Adam Lewis, or Sallie Boyd DSL/Pastoral lead.

Possible warning signs, which all staff should be aware of 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
* 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

# **Targeted support**

We recognise some children and young people are at greater risk of experiencing poorer mental health. For example, those who are in care, young carers, those who have had previous access to CAMHS, those living with parents/carers with a mental illness and those living in households experiencing domestic violence.

We ensure timely and effective identification of children who would benefit from targeted support and ensure appropriate referral to support services by:

* Providing specific help for those children most at risk (or already showing signs) of social, emotional, and behavioural problems;
* Working closely with CAMHS and other agencies/services, including assessment and referral;
* Discussing options for tackling these problems with the child and their parents/carers.
* Providing a range of interventions that have been proven to be effective,

According to the child’s needs;

* Ensure young people have access to pastoral care and support, as well as specialist services, including CAMHS, so that emotional, social and behavioural problems can be dealt with as soon as they occur;
* Provide young people with clear and consistent information about the opportunities available for them to discuss personal issues and emotional concerns. Any support offered should take account of local community and education policies and protocols regarding confidentiality;
* Provide young people with opportunities to build relationships, particularly those who may find it difficult to seek support when they need it; (eg school buddy system/peer support/monitor roles/link adult with child for one to one guidance)

# **Managing disclosures**

If a pupil chooses to disclose concerns about themselves, or a friend, to any member of staff, the response will be calm, supportive and non-judgemental.

Confidentiality-If a member of staff feels it is necessary to pass on concerns about a pupil to either someone within or outside of the school, then this will be first discussed with the pupil. We will tell them:

* Who we are going to tell
* What we are going to tell them
* Why we need to tell them
* When we’re going to tell them

It is important to also safeguard staff emotional wellbeing. By sharing disclosures with a colleague this ensures one single member of staff isn’t solely responsible for the pupil. This also ensures continuity of care should staff absence occur and provides opportunities for ideas and support.

Parents and carers must always be informed, however, if a pupil gives us reason to believe that they are at risk, or there are child protection issues, parents should not be informed, but the child protection procedures should be followed.

## **Working with parents/carers**

We are mindful that for a parent/carer, hearing about their child’s issues can be upsetting and distressing. They may therefore respond in various ways which we should be prepared for and allow time for the parent to reflect and come to terms with the situation.

Signposting parents to other sources of information and support can be helpful in these instances. Lines of communication should be kept open should the parents have further questions or concerns.

We recognise the family plays a key role in influencing children and young people’s emotional health and wellbeing; we will work in partnership with parents and carers to promote emotional health and wellbeing by:

* Ensuring all parents are aware of and have access to promoting social and emotional wellbeing and preventing mental health problems;
* Highlighting sources of information and support about common mental health issues through our communication channels (website, newsletters etc.);
* Offering support to help parents or carers develop their parenting skills. This may involve providing information or referring to the Triple P parenting course/Time out for parents course for parents of children with SEN.
* Ensuring parents, carers and other family members living in disadvantaged circumstances are given the support they need to participate fully in activities to promote social and emotional wellbeing. We recognise this might involve liaison with family support agencies.

# **Training**

As a minimum, all staff will receive regular training/updates about recognising and responding to mental health issues as part of their regular child protection training to enable them to keep children safe. The DSL/ nominated member of staff will receive professional Youth Mental Health First Aid training or equivalent.

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 children.

Where the need to do so becomes evident, we will lead training sessions for all staff to promote learning or understanding about specific issues related to mental health.

**Subject leader-**Sallie Boyd

**Subject link Governor-**Tom Finnie

**Date-**June 2021

**Date for next review:** June 2022