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| **Dale Community Primary**  **and**  **Stonehill Nursery Federation**  **Mental Health**  **and**  **Wellbeing Policy** |



**Head Teacher: Louise Foster**

**Chair of Governors: Russell Langley**

**Policy Approved by: Governors Behaviour and Safety Committee**

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Safety Committee

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Safety Committee

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Safety Committee

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Safety Committee

**MENTAL HEALTH AND WELLBEING**

**Introduction**

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 Organisation)

At Dale Community Primary School and Stonehill Nursery School, it is our vision that all children are entitled to develop to their fullest potential academically, socially and emotionally, enabling each child to grow in confidence and be able to fully participate in everything that goes on in the wider community with confidence. It is widely recognised that a child’s emotional health and wellbeing influences their cognitive development and learning, as well as their physical and social health and their mental wellbeing in adulthood. The Department for Education increasingly recognises the importance of Emotional Health and Wellbeing as part of the support all schools should give to pupils (DfE, 2017).

At our school, we promote positive mental health for every child, parent / carer and staff. We pursue this aim using both universal, whole school trauma and mental health informed approaches and specialised, targeted approaches aimed at identified vulnerable pupils and families.

In addition to promoting positive mental health through a whole school approach, we aim to recognise and respond to mental ill health. In an average classroom, three children could be suffering from a diagnosable mental health issue or will require support before they are 16 years old (Public Health England, 2015). We recognise that by developing and implementing practical, relevant and effective mental health procedures we can promote a safe and stable environment for children affected both directly, and indirectly by mental ill health.

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

**Aims**

This policy aims to:

* Promote positive mental health in all staff and pupils
* Increase understanding and awareness of common mental health issues
* Alert staff to the early warning signs of mental ill health
* Provide support to staff working with pupils with mental health issues
* Provide support to pupils suffering mental ill health and their peers and parents/carers

**Ethos**

Dale Community Primary School and Stonehill Nursery School aims to support and teach skills to pupils and staff to increase their awareness of emotional health and wellbeing. This is supported through the school’s commitment to teaching the whole child and ensuring children are learning in an environment that supports a positive ethos and using a trauma informed approach to influence our practice.

The following diagram presents eight principles to promote emotional health and wellbeing in schools and colleges (Public Health England 2015).



The eight identified principles will underpin the approaches used to support the development and integration of wellbeing strategies at Dale Community Primary School and Stonehill Nursery School. The policy and curriculum delivery will be tailored to promote the key aspects of improving mental health illness and wellbeing. It will focus on creating a socially, emotionally and physical rich school environment where key relationships can thrive and children can feel secure in their learning. Pupil voice is a key aspect of supporting emotional wellbeing. Staff will have access to training and signposting to approaches and resources that will support their own emotional health and wellbeing with an aim to foster teamwork and create solidarity.

All staff have a responsibility to promote the mental health and emotional wellbeing of pupils. Staff with a specific, relevant responsibility include:

* Louise Foster – Designated Senior Lead for Mental Health
* Tania Robinson – Deputy Lead for Mental Health
* Louise Foster - Designated Safeguarding Lead (DSL)
* Adele Doxey - Inclusion Manager
* Eileen Hazel, Katrina Holness, Shahed Rehman and Amy Scott – Inclusion Officers
* Sabba Mann – PSHE lead

Gaynor Bates

Mental Health First Aiders

Anhilah Jabeen

Charlie Dodes

Gurbinder Kooner

**Support for Mental Health and Wellbeing - Staff**

The wellbeing of staff underpins the school’s ethos and is recognised as being important by the leadership team and Governors. The Governors and leadership team aim to build a culture of trust where all staff feel valued, can be open about their health and wellbeing and know how to access support if they need it. For this to happen, it is essential for the Head Teacher and leadership team to model good mental health and wellbeing behaviour and practice.

Examples of this practice can be seen in Appendix 1.

**Support for Mental Health and Wellbeing – Pupils**

Wave 3

Wave 2

Wave 1

Support for Mental Health and Wellbeing will follow this approach:

Wave 1 – Inclusive quality first teaching/provision for all

Wave 2 – Additional interventions for individuals run by school

Wave 3 – Highly personalised interventions using expert external support

Examples of this practice can be seen in Appendix 2.

**Warning Signs in pupils**

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 communicate their concerns with 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 or sleeping habits
* Increased isolation from friends or family, becoming socially withdrawn or withdrawn in the classroom
* 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

**Signposting**

We will ensure that staff, pupils and parents 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 3.

We will display relevant sources of support in communal areas such as the staff room and toilets and will regularly highlight sources of support to pupils within relevant parts of the curriculum.

**Pupil Identification**

Any member of staff who is concerned about the mental health or wellbeing of a child should speak to the Designated Lead for Mental Health in the first instance. If there is a fear that the child is in danger of immediate harm then the normal safeguarding procedures should be followed. Where a referral to Childhood and Adolescent Mental Health Services (CAMHS) is appropriate, this will be led and managed by the Inclusion Manager.

**Procedure for pupils where there are concerns about mental health issues.**

If a pupil chooses to disclose concerns about their own mental health or that of a friend to a member of staff, the member of staff’s response should always be calm, supportive and non-judgemental.

Staff should listen rather than advise and first thoughts should be of the pupil’s emotional and physical safety rather than of exploring ‘Why?’ All disclosures should be recorded on MyConcern.

This information should be shared with the Designated Safeguarding Leads who will store the record appropriately and offer support and advice about next steps.

**Procedure for staff where there are concerns about mental health issues.**

If there are any concerns around the mental health issues noticed in members of staff, the same procedure as above may be followed. It may be that the relationships between members of staff, may mean that they can be encouraged to seek their own support e.g. via the GP or to talk to a trained Mental Health First Aider. Otherwise, it can be referred to the Head Teacher. As part of equality within the school, there is no stigma associated with a mental health issue and staff should feel open to discuss any issues with leaders and colleagues within school. The school offers counselling sessions at least once every half term that staff can access in confidence. To access this support, please speak to the School Business Manager.

**Confidentiality**

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

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

It is often the case that parents will be informed as soon as possible about any concerns around a child’s mental health. This is a decision to be made by the Designated Safeguarding Leads and contact with parents must only be made if it is agreed by the DSLs.

**Working with Parents and Carers**

In order to support parents we will:

* Ensure that all parents are aware of who they can to talk to, and how to get the support they need if they have concerns about their own child or a friend of their child.
* Make our mental health policy easily accessible to parents.
* Share ideas about how parents can support positive mental health in their children through our ongoing meetings e.g. Tea and Talk sessions
* Keep parents informed about the mental health topics their children are learning about

**Staff Training and CPD**

As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular child protection 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 to developing situations with one or more pupils.

**Role of the Governing Body**

The Governors of Dale Community Primary School and Stonehill Nursery School are fully supportive of the drive to support positive mental health and understand the need for targeted support and intervention as needed. As part of ongoing monitoring by the Governing Body, the contents of this policy will be monitored to ensure that all aspects are embedded within the school.

**References**

Public Health England (2015) Promoting children and young people’s emotional health and wellbeing: a whole school and college approach.

DfE (2017) Supporting mental health in schools and colleges.

This policy will always be immediately updated to reflect personnel changes and legislation.

Appendix 1 – Staff Support for Mental Health and Wellbeing

Appendix 2 – Pupil Support for Mental Health and Wellbeing

Appendix 3 – What support is available within our school and local community, who it is

aimed at and how to access it.

***Appendix 1***

**Staff Support for Mental Health and Wellbeing**

* Environment that encourages public praise and celebration e.g. Staff Shout out board, during morning briefings, whole school meals after OFSTED.
* Supportive environment e.g. giving colleagues breaks when stressful periods occur.
* Flexibility within planned overview e.g. staff meetings and INSET days adjusted to support workload.
* Awareness of teacher workload and overview of the year planned as a result e.g. staff meetings for planning, staff meetings for assessment, INSET days for report writing, food provided at Parent’s Evenings.
* Workload documents discussed with teachers and procedures adjusted.
* Positive relationships between staff encouraged e.g. nights out, breaktimes and lunchtimes arranged at the same time for everyone, Christmas dinner organised in teams.
* Staff voice encouraged in decision making e.g. marking policy, new curriculum.
* Tailored CPD from a variety of providers e.g. in school, PSG, NPQs.
* Flexible Leave of Absence policy e.g. staff able to attend their own children’s sports day.
* Supportive and open Senior Leadership e.g. door open policy, greeting members of staff in the morning.
* Free access to trained Counsellor in school.
* Half day PPA per week (even for part time staff). Staff from each year group released at the same time.
* Half day per week to carry out interventions, observing good practice internally and externally, pupil discussions, audits of environment, reading and writing conferences with children.
* School Wellbeing Team organising events throughout the year.

***Appendix 2***

Wave 1 – Inclusive quality first teaching/provision for all

Wave 2 – Additional interventions for individuals run by school

Wave 3 – Highly personalised interventions using expert external support

**Pupil Support for Mental Health and Wellbeing**

**Wave 1**

* Nurturing environment
* Support from Inclusion Officers e.g. open door policy to the Community Room
* Music lessons
* Mindfulness e.g. Go Noodle
* Positive behaviour policy e.g. Afternoon tea, Top table, Collaborate, morning welcome that encourages Restorative Justice
* PE and sports prioritised by SLT and Governors e.g. dedicated Sports Team, afterschool clubs, holiday clubs
* Broad and balanced curriculum
* PSHE curriculum
* Inclusivity encouraged e.g. emotions fans
* Environment devised to support wellbeing e.g. safe, secure places for FS1 children to withdraw to
* Mental health and wellbeing assemblies with Anti-Stigma Ambassadors

**Wave 2**

* SEND Intervention – Sensory Circuits
* SEND Intervention – Attention Autism
* SEND Intervention – Nurture Group (to support understanding emotions and food avoidance)
* SEND support – Sensory Room
* Afterschool clubs
* Therapeutic Interventions run by the Inclusion Officers using trauma informed approaches e.g. Big bag of worries, loss/bereavement, friendships
* Sports Team – Plus events, competitions, festivals
* Circle Time in classes to support specific issues e.g. feelings, relationships

**Wave 3**

* EAL support from NCAT team
* SEND support from Educational Psychologist
* CAMHS

***Appendix 3***

**What support is available within our school and local community, who it is aimed at and how to access it.**

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| **Support for pupils** | |
| Organisation | Contact details |
| Anna Freud Centre | annafreud.org |
| Charlie Waller Memorial Trust | cwmt.org.uk |
| Childline | childline.org.uk  Helpline – 0800 1111 |
| Mind | mind.org.uk |

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| **Support for staff** | |
| Organisation | Contact details |
| In school counselling | Contact the School Business Manager to make an appointment |
| In school Mental Health first aiders | Gaynor Bates, Anhilah Jabeen, Charlie Dodes, Gurbinder Kooner |
| Education Support Partnership | Helpline -08000 562 561  <https://www.educationsupportpartnership.org.uk/teachers-mental-health> |
| Heads Together – Mentally Healthy Schools | <https://www.mentallyhealthyschools.org.uk/> |
| The Samaritans | Free telephone number - 116 123 |