

Aspire Academy Trust



Supporting a Mentally Healthy School Policy

Date: November 2020
Date of Approval: 3rd December 2020
Approved by: Executive Team
Review Date: September 2023

Revision Log (last 5 changes)

Date	Version No	Brief detail of change
23 rd November 2020	2	Amendment to wording
23 rd November 2020	2	Covid-19 response section added

Supporting a Mental Health School Policy

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 Organisation)

At all Aspire academies/schools, we aim to promote positive mental health for every member of our staff and children. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable children. 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 children affected both directly, and indirectly by mental ill health.

Scope

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, Aspire Board, Hub Councillors and volunteers. This policy should be read in conjunction with any Individual Health Care Plans in cases where a child's mental health overlaps with or is linked to a medical issue and the SEND policy where a student has an identified special educational need.

The Policy Aims to:

- ♣ Promote positive mental health in all staff and children
- ♣ 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 children 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 children. Staff with a specific, relevant remit will be listed on the school website.

Any member of staff who is concerned about the mental health or wellbeing of a child 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 and/or the head of school. If the child 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 the identified member of staff or SENDCo. Guidance about referring to CAMHS can be provided by the school.

Individual Care Plans

It is helpful to draw up an individual care plan for pupils causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the pupil, the parents 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 children to keep themselves and others physically and mentally healthy and safe are included as part of our developmental PSHE curriculum. 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 children 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.

We will ensure that staff, children and parents are aware of sources of support within school and in the local community.

Signposting

What support is available within our school and local community, who it is aimed at and how to access it is outlined on the school website.

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

Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring children 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 key named staff listed on the school website. 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 secretly
- ♣ Lateness to or absence from school
- ♣ Repeated physical pain or nausea with no evident cause
- ♣ An increase in lateness or absenteeism

Managing disclosures

A child 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 child 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 using 'My Concern'.

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 key staff listed who will record appropriately and offer support and advice about next steps.

Confidentiality

We will be honest with regards to the issue of confidentiality. If we believe it is necessary for us to pass on our concerns about a child, 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

We will never share information about a child without first telling them¹. Ideally, we would receive consent, though there are certain situations when information must always be shared with another member of staff and/or a parent. (i.e. children up to the age of 16 who are in danger of harm or child protection issues). It is always advisable to share disclosures with a colleague, usually the Head of School/Safeguarding/Mental Health Lead, 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 will explain this to the child and discuss with them who it would be most appropriate and helpful to share this information with.

Parents must always be informed unless a child gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but the Child Protection Officer must be informed immediately.

Working with Parents

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

¹ Except in exceptional circumstances

It can be shocking and upsetting for parents to learn of their child's issues and many may respond with anger, fear or upset during the first conversation. We will be accepting of this (within reason) and give the parent time to reflect. We will 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 can also be helpful too e.g. parent helplines and forums. We will 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 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.

Parents 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, we will:

- ♣ Highlight sources of information and support about common mental health issues on our school website
- ♣ Ensure that all parents 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
- ♣ Share ideas about how parents can support positive mental health in their children through our regular updates.
- ♣ Keep parents informed about the mental health topics their children are learning about in PSHE.

Supporting Peers

When a child 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. What 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 needs 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 regular training and signposting to training about recognising and responding to mental health issues as part of their CPD and in addition to annual safeguarding training in order to enable them to keep children safe. We will host relevant information on our virtual learning environment for staff who wish to learn more about mental health. The MindEd learning portal² and

provides free online training suitable for staff wishing to know more about a specific issue. Our staff also has access to online mental health training through iHasco and this will be available to all school staff. This training will be mandatory.

Training opportunities for staff who require more in-depth knowledge (such as TISUK) as part of their role 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 children. Every Aspire Academy will have at least one TiSUK practitioner.




Where the need to do so becomes evident, we will host twilight training sessions for all staff to promote learning or understanding about specific issues related to mental health. Suggestions for individual, group or whole school CPD should be discussed with the Head of School who can also highlight sources of relevant training and support for individuals as needed.

This policy will be reviewed every 3 years.

Any further information/support can be obtained from the Aspire Inclusion Team.

Covid – 19 Response Mental Health and Wellbeing

Autumn 2020

<p>Whole school approaches The universal offer to all children and YP.</p> 	<p>Additional, targeted support and provision</p> 	<p>Specialist, individualised support and provision</p> 
<p>Extra support sessions with Education Psychologists and TISUK Lead over lock down. Communications with children ‘time capsule’ to ascertain children’s’ experiences. Robust communications with families and external agencies. Robust training/ planning on transitions. Robust systems of assessment to ascertain where pupils are now – whole class motional assessments, engagement tools doing lockdown, Transition training with TISUK and Educational Phycologists – Inclusion Shared area.</p> <p>Behaviour policy to encompass new health and safety routines – visual supports – in class learning and modelling</p> <p>Part of daily routine/structure – ensure ‘the norm’.</p>	<p>Robust systems of assessment to ascertain where pupils are now – individual motional assessments</p> <p>Review of IEPS for all pupils on SEN support. Ensure any adjustments of targets/provision is in place. Ensure cycles of assess, plan, do, review target and respond to presenting needs now.</p> <p>Review intervention programme</p> <p>Multiagency collaboration and referrals – risk assessments in place</p> <p>Individual Motional Assessments to ascertain emotional wellbeing and plan support accordingly</p>	<p>Review EHCP provision / outcomes are accurate and any adjustments addressed through formal processes with the Local Authority</p> <p>EHCP risk assessments when required</p> <p>EP planning and Support</p> <p>Multiagency collaboration and referrals – risk assessments in place</p> <p>Individual Motional Assessments to ascertain emotional wellbeing and plan support accordingly</p> <p>Visual supports and social stories to communicate whole school new routines</p>

<p>Behaviour policy – expectations explicit – encompassed with overall good school expectations.</p> <p>Robust tracking – my concern/ABC/ IEPs/ Behaviour plans, attendance, exclusions, motional etc</p> <p>Behaviour management Training provided to all schools.</p> <p>Ongoing sessions with Inclusion Lead and TIS UK Lead – training to support staff resilience and understanding of impact- fear, anxiety, bereavement, loss.</p> <p>Focus on re-establishing secure relationships and routines– TISUK Relate, reflect, regulate, and Protect.</p> <p>Focus on containment</p> <p>Tis Practitioners in all schools</p> <p>SEND provision overview and SEF/Audit</p>	<p>Visual supports and social stories to communicate whole school new routines</p> <p>Enhanced support around new routines. Visuals/social stories/ adult support</p> <p>Local Authority Mental Health Support Team working across settings.</p> <p>Key staff to support mental health and wellbeing. TIS practitioners.</p> <p>Clear actions to support vulnerable groups – linked to SEND and PP</p>	<p>Enhanced support around new routines – visuals/social stories/adult support/risk assessments</p>
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This policy is supported by the training provided by:

Leading a Mentally
Healthy School



<p>Comprehensive Trust wide training sessions for all staff and SENDCos – for example Differentiation, social stories, transitions – return to school and from setting to setting, Trauma Informed Schools – advice and guidance to support staff, children and communities.(further information in the Inclusion file and on the CPD link)</p> <p>Ensure parental/family engagement</p> <p>Virtual meetings offered</p> <p>Whole class Motional assessments to ascertain emotional wellbeing and embed whole school response strategies.</p> <p>Whole school approaches to embed new school routines.</p> <p>Implementation of DfE and LA guidance.</p>		
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