



STANBRIDGE LOWER SCHOOL

Positive Mental Health Policy & Procedures

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NON STATUTORY

Policy Statement

According to the World Health Organisation:

'Mental health is a state of wellbeing 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 is fundamental to our collective and individual ability as humans to think, emote, interact with each other, earn a living and enjoy life. On this basis, the promotion, protection and restoration of mental health can be regarded as a vital concern of individuals, communities and societies throughout the world.'

At our school, we are committed to the protection and promotion of positive mental health for all students and staff. We will continuously endeavour to improve the mental health of the school community by utilising a [whole school approach](#) to promote good mental health and wellbeing.

In addition to promoting positive mental health, we recognise that one in six children and young people¹ and one in six adults² may meet the criteria for a diagnosable mental health problem, with emerging evidence of a recent rise in anxiety and depression in some groups (as of 2020).³ We aim to identify and provide timely and appropriate support for all members of the school community affected both directly and indirectly by mental health problems.

Policy Aims

By developing and implementing practical, effective and positive policies and procedures relevant to our school and developed in conjunction with students and their parents and carers, we can promote a safe and supportive environment and ethos which is conducive to the mental health and wellbeing of the whole school community.

We will:

- Support students to understand their emotions
- Help children to manage change and adversity and develop resilience
- Provide an environment which is conducive to students sharing concerns about themselves or others

We will promote a mentally healthy school environment by:

- Adopting a whole school approach to mental health and wellbeing
- Raising awareness in the whole school community of the signs and symptoms of mental health problems

¹ NHS Digital. Mental Health of Children and Young People in England, 2020: Wave 1 follow up to the 2017 survey. 2020. Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2020-wave-1-follow-up>

² McManus S, Bebbington P, Jenkins R, Brugha T. (eds.) Mental health and wellbeing in England: Adult psychiatric morbidity survey 2014. (2016) Available from: <https://digital.nhs.uk/data-and-information/publications/statistical/adult-psychiatric-morbidity-survey/adult-psychiatric-morbidity-survey-survey-of-mental-health-and-wellbeing-england-2014>

³ Kwong A, Pearson R, Adams M, et al. Mental health before and during the COVID-19 pandemic in two longitudinal UK population cohorts. British Journal of Psychiatry. 2020. 218(6).

- Supporting staff to manage their own mental health and wellbeing
- Supporting staff to respond swiftly and effectively to any signs of an emerging mental health problem
- Engaging in activities which promote mental health and wellbeing and a sense of belonging in the whole school community
- Celebrating individual differences in students, ensuring all students feel valued and respected
- Valuing and celebrating non-academic achievements

Policy Objectives:

- Promote positive mental health in all staff and students
- Reduce discrimination and stigma by increasing awareness and understanding of mental health problems
- Increase awareness of early warning signs of mental health problems
- Provide support to staff working with young people with mental health issues
- Provide support to students experiencing mental health problems and their peers and parents or carers
- Provide opportunities for staff and students to look after their mental wellbeing.

Lead Members of Staff

Whilst all staff have a responsibility to promote the mental health of students, staff with a specific, relevant remit include:

- Sam Gooding: Designated child protection / safeguarding officer
- Charlotte Golby - Mental health lead / senior mental health lead
- Yvonne Patterson - Lead first aider
- Charlotte Golby - SENCo
- Sam Gooding - Pastoral lead including RSHE
- Sam Gooding - CPD lead

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.

In the event of any concerns that a student may be at risk of immediate harm, the school's child protection procedures should be followed, with an immediate referral to the designated safeguarding lead or her deputies.

If the student presents as a medical emergency, then the school's procedures for medical emergencies should be followed, including the involvement of first aid staff and contacting the emergency services.

Where a referral to Children and Young Peoples Mental Health Services (CYPMHS, also sometimes known as CAMHS) is appropriate, this will be led and managed by Charlotte Golby (SENCo & SMHL)

Individual Care Plans

It is helpful to draw up an individual care plan for students where there is concern about a potential mental health problem or in instances where a student has received a diagnosis of a mental health problem. Care plan development should be a collaborative process, involving the student, the parents and carers and any relevant health professionals. The care plan may include:

- Details of the student's mental health problem and any diagnosis
- Details of any prescribed medication and any reported side effects
- Special requirements and precautions
- What to do and who to contact in an emergency
- The role the school can play
- The role that parents and carers 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 RSHE curriculum.

The content of lessons will be determined by the specific needs of the cohort we are teaching, but there will always be an emphasis on enabling students to develop the skills, knowledge, understanding, language and confidence to identify when mental health problems may be emerging, and to seek appropriate support when needed, for themselves or others.

We will follow the [Relationships Education, Relationships and Sex Education \(RSE\) and Health Education](#) statutory guidance to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

Support and Signposting

Whenever we highlight sources of support, we will increase the chance of student help-seeking. We will ensure that staff, students, and parents and carers are aware of sources of support within school and in the local community, including outlining:

- The help that is available
- Who the help is for
- The reasons for accessing the support
- When to access the support
- How to access the support
- What is likely to happen once the student has accessed the support

We will display relevant sources of support in communal areas such as the main reception area, staff room, toilets and website, and will regularly highlight sources of support to children within relevant parts of the curriculum. The support available within our school and local community, including who it is aimed at and how to access it is outlined in Appendix D.

Warning Signs

School staff may become aware of warning signs which may 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 to Tracy Davies (SMHL)

We all differ in outward manifestations of distress, so it is important to consider any signs of change, for example, someone who is normally outgoing and communicative becoming less talkative and more withdrawn. It is important to emphasise that for some students experiencing distress, there may not be any apparent warning signs, or the student may actively be trying to hide their distress.

Potential warning signs include:

- Physical signs of harm that are repeated or appear non-accidental
- Evidence of any changes to eating or 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
- Evidence of use of non-prescribed drugs or alcohol
- Expressing thoughts and feelings of failure, hopelessness or worthlessness
- Unsuitable clothing (for example, long sleeves in warm weather)
- Secretive or unusual behaviour
- Avoiding attendance at PE or getting changed secretly
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism
- Expressing unusual ideas or beliefs

Managing disclosures

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 focus on listening in the first instance, rather than thinking about giving advice or offering solutions. Our first intent should be on the provision of a safe and secure space to discuss the student's concerns and promoting their emotional and physical safety. For more information about how to handle mental health disclosures sensitively see appendix E.

All disclosures should be recorded in writing and held on the student's confidential file. This written record should include:

- The date and time of the disclosure
- The name of the member of staff to whom the disclosure was made
- Main points from the conversation
- Agreed actions

This information should be shared with the Mental Health Lead who will store the record appropriately and offer support and advice about next steps. See appendix F for guidance about making a referral to Children and Young Peoples' Mental Health Services (CYPMHS, previously known as CAMHS).

Confidentiality

Disclosures should be reported to 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. The safety of students is our priority and we will therefore share information with parents/carers and appropriate agencies when we believe that a student is at risk.

Working with Parents and Carers

We recognise the importance of working with and supporting parents and carers as part of our whole school approach to mental health and wellbeing. We will:

- Ensure that this policy is available in accessible formats including multiple languages
- Make the policy, and other sources of information and support about common mental health issues, available in a prominent position on our school website
- Involve parents and carers in the ongoing review and development of this policy
- Ensure that all parents are aware of who to contact and how, if they have concerns about their own child or a friend of their child
- Ensure that parents and carers are involved in our whole school approach to mental health and wellbeing
- Ensure that parents and carers are aware of the support available within the school and externally
- Share ideas about how parents can support positive mental health in their children through our regular information evenings
- Keep parents and carers informed about the mental health topics their children are learning about in RSHE and share ideas for extending and exploring this learning at home
- Provide opportunities for parents to be involved in any training or other activities which may help them support their child's mental health

We will keep parents or carers informed of any concerns relating to the mental health of their child. In this event, we will be sensitive in our approach. Before disclosing to parents or carers we should consider the following questions (to be adapted on a case by case basis):

- What are the aims of the meeting?
- Can the meeting be held face to face? This is preferable, subject to any restrictions.
- Where would be the best environment to conduct the meeting? At school, at their home or somewhere neutral?
- Who should be present? Consider parents and carers, the student, relevant members of staff.

It may be shocking and upsetting for parents or carers to learn that their child may be experiencing a mental health problem, and we should be prepared for a range of responses, which may include fear, anger or emotional distress during the first conversation. We should be accepting of this (within reason) and give the parent or carer time to reflect.

We will 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 we're sharing. Sharing sources of further support aimed specifically at parents and carers can also be helpful too, e.g. parent helplines and forums.

We will provide clear means of contacting us with further questions and consider booking in a follow-up meeting or phone call right away as parents and carers often have many questions as they process the information. Finish each meeting with agreed next steps and always keep a brief record of the meeting on the child's confidential record.

Supporting Peers

When a student is experiencing a mental health problem, it can be a difficult time for their friends, who may want to offer support, but do not know how to do so. 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 with the student who is suffering and their parents or carers, with whom we will discuss:

- What it is helpful for friends to know and what they should not be told
- How friends can best provide support whilst managing their own wellbeing
- Things friends should avoid doing or saying which may inadvertently cause distress
- Warning signs that their friend may need 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 about recognising and responding to mental health issues as part of their regular child protection training to enable them to keep students safe. The [MindEd learning portal](#) provides free online training suitable for staff wishing to know more about specific issues.

Training opportunities for staff who require more in depth knowledge will be considered as part of our professional development process and additional CPD will be supported throughout the year where it becomes appropriate due to developing situations with one or more students. Department for Education grant funded Senior Mental Health Lead training may also be available, in partnership with the [Charlie Waller Institute](#), the Charlie Waller Trust offers its own [Senior Mental Health Leads training](#).

The [Charlie Waller Trust](#) provides funded training to schools on a variety of topics related to mental health including twilight, half day and full day INSET sessions.