

Bankfields Primary School Mental Health Policy

Policy created: 9.9.24 Policy to be reviewed: 9.9.27

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# **Bankfields Primary School**

# **Mental Health and Emotional Wellbeing Policy**

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## Policy statement

At Bankfields Primary School, we are committed to promoting positive mental health and emotional wellbeing of all students, their families and members of staff and governors. Our aim is to provide a safe and supportive environment for all to discuss mental health and wellbeing openly with frequent and clear opportunities to seek any help and support they need. This policy outlines how we will develop a whole school approach to mental health and wellbeing by embedding good practice in prevention, identification and support.

# 2.0 Scope

This policy is a guide to all staff – including non-teaching and governors – outlining Bankfields Primary School’s approach to promoting mental health and emotional wellbeing. It should be read in conjunction with other relevant school policies.

# 3.0 Policy Aims

* Promote positive mental health and emotional wellbeing in all staff and students.
* Ensure all staff are aware of ways to create a safe and positive classroom environment, which promotes positive mental health.
* Increase understanding and awareness of common mental health issues.
* Enable staff to identify and respond to early warning signs of mental ill health in students.
* Enable staff to understand how and when to access support when working with young people with mental health issues.
* Provide the right support to students with mental health issues, and know where to signpost them and their parents/carers for specific support.
* Develop resilience amongst students and raise awareness of resilience building techniques.
* Raise awareness amongst staff and gain recognition from SLT that staff may have mental health issues, and that they are supported in relation to looking after their wellbeing; instilling a culture of staff and student welfare where everyone is aware of signs and symptoms with effective signposting underpinned by behaviour and welfare around school.
* To coordinate training, support and intervention for mental health and to assess the impact of these, using this assessment to inform future practice.

# 4.0 Key staff members

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

* The Senior/Middle Leadership Team
* Designated Safeguarding Lead
* SENCO
* Designated Mental Health Lead
* Mental Health First Aid Champions
* PSRHE Coordinator

If a member of staff is concerned about the mental health or wellbeing of a student, in the first instance they should speak to the designated mental health lead. If there is a concern that the student 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.

# 5.0 Individual Health Care Plans and Risk Assessments

When a pupil has been identified and has recieved a diagnosis of a mental health issue, or is receiving support either through CAMHS or another organisation, it is recommended that an Individual Health Care Plan should be drawn up. The development of the plan should involve the pupil, parents, and relevant professionals. Alternatively, if staff or parents have identified a cause for concern related to a child’s mental health, or a mental health issue that may lead to the child harming themselves or others, a risk assessment should be put in place to safeguard all staff and pupils concerned.

Suggested elements of this plan include:

* Details of the pupil’s situation/condition/diagnosis
* Special requirements or strategies, and necessary precautions
* Medication and any side effects
* Who to contact in an emergency
* The role the school and specific staff

# 6.0 Teaching about mental health

The skills, knowledge and understanding our students need to keep themselves - and others - physically and mentally healthy and safe are included as part of our PSRHE curriculum and supplemented by our work with: HeadStart, mental health first aiders, THRIVE, sunshine circles and themed days/week such a Mental Health Awareness Month and World Mental Health Day. All staff have complete a Blue Mental Health Support education programme.

Additionally, we will use such lessons as a vehicle for providing students who do develop difficulties with strategies to keep themselves healthy and safe, as well as supporting students to support any of their friends who are facing challenges.

Furthermore, the DMHL will ensure that themselves and all school staff are aware of all local mental health services (including early and specialist provision) whom the staff can contact for support and advice or refer children and their families to for support beyond school.

# 7.0 Signposting

We will ensure that staff, students and parents/carers are aware of the support and services available to them, and how they can access these services.

Within the school (noticeboards, common rooms, toilets etc.) and through our communication channels (newsletters, websites), we will share and display relevant information about local and national support services and events.

The aim of this is to ensure students understand:

* What help is available
* Who it is aimed at
* How to access it
* Why should they access it
* What is likely to happen next

# 8.0 Sources or support at school and in the local community

**School Based Support**:

* Mental Health First Aiders: Miss Thompson, Miss McIlvenny, Mr Mcloughlin and Mrs Kidd, **Mrs Walker and Mrs Harding**. These adults have had specialist training to be able to support children who are struggling with their mental health. Any child or member of staff who needs attention can contact them at any time within school hours. This can be directly by going to them or by asking another member of staff to contact them, by posting a worry in the worry box or asking a parent to ring school. The children will be made aware of staff trained as mental health first aiders through a display in the East Hall and by regularly being reminded in assemblies/mindful Mondays.
* School Counsellor: Michelle Evenden. Parents can ask that their child be referred to our school counsellor and staff often submit referrals for the school counsellor but the SENDco is responsible for deciding how time with the school councillor is allocated based on need. All staff are made aware of this service by our SENDco and staff make parents aware if they raise any concerns regarding their children’s mental health.
* THRIVE: This is delivered by trained staff members – Mrs Brearley, Mrs Walker and Mrs Kerrsion. This is suitable for and can be accessed by any child in the school. An assessment is undertaken each half term by staff which highlights which children need support in the THRIVE programme and their specific area of need. Teacher assessment supports the practitioners decisions (based on the assessment tool) on who will receive THRIVE and how these children will be grouped. Children are made aware of THRIVE by the practitioners through their sessions. Parents are made aware if they raise concerns regarding their children’s social/emotional/behavioural development.
* Family Thrive: ***sessions will become available in the 25/26 academic year*** to support our parents in applying THRIVE techniques in the home. If staff identify families they feel would benefit from this support they should inform a THRIVE practitioner.
* Sunshine Circles is run by Miss Evans and Mrs Harding. This is suitable for Reception and Year 1 students. It is accessed through teacher referral and parental consent. The purpose of sunshine circles has been shared with KS1 staff during the initiation of the programme and is shared with children during their sessions.
* Getting Help Sessions: attended half termly by the designated mental health lead to discuss pupils with needs which exceed the current school offer in order to signpost/refer parents to further CAMHS or NHS services. If staff identify children who would benefit from this service, they should inform the DMHL.
* Headstart: This programme is run by an external agency and they offer a range of services to our school. Children were made aware of the bronze and silver headstart award and allowed to choose if they would like to be a part in the programme. This is suitable for KS2 children and trains them to be mental health champions and student counsellors. They also offer a Tuff Tees programme for our Year 6 boys. All year 6 boys can access this programme and will be made aware of its purpose in the sessions. The sessions will focus on the importance of boys continuing to discuss their emotions and mental health, as they get older. They also offered themed assemblies on World Mental Health Day, National Stress Awareness Week, Anti-Bullying week etc to our whole school. Finally, they offer a transition programme to prepare our Y6 children for secondary school. This is available to the whole cohort.
* Rubies: This programme is ran by an external agency and their provision is available to all Year 6 girls. It encourages them to speak positively about themselves, to raise their aspirations and to appreciate their talents.

**Local Support:**

### **South Tees Mental Health Support Team**

### The Link

### Middlesbrough and Stockton Mind

### The Junction

### A Time 4 you

### ABC

### Changing Futures North East

### Redcar & Cleveland Mind.

**Redcar Multi Agency Childrens Hub**

**CAMHS**

**Early Help**

# 9.0 Warning Signs

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 alert (DMHL-Miss Thompson or a mental health first aider).

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
* 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

# 10.0 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 with SEND, 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 students 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 external providers to follow various protocols including assessment and referral;
* Discussing options for tackling these problems with the child and their parents/carers. Agree an Individual Care Plan as the first stage of a ‘stepped care’ approach;
* 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 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;
* Taking a whole school approach to mental health;
* Ensuring all staff deliver a broad range of preventative activities throughout the year;
* Coordinating provision to ensure all staff: have Mental Health awareness training, can support children with their Mental Health needs, are confident in allocating and overseeing mental health interventions and monitoring their impact, establish clear links with children and young people's mental health services and make appropriate referrals; and
* Supporting staffs’ mental health and wellbeing.

# 11.0 Managing disclosures

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

All disclosures should be recorded confidentially on CPOMS, including:

* Date
* Name of member of staff to whom the disclosure was made
* Nature of the disclosure & main points from the conversation
* Agreed next steps

This information will be shared with the safeguarding team and DMHL.

When the student counsellor scheme (Headstart Silver Award) is in place, any disclosures made will also map with this process.

# 12.0 Confidentiality

If a member of staff feels it is necessary to pass on concerns about a student to either someone within or outside of the school, then this will be first discussed with the student. 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

Ideally, consent should be gained from the student first, however, there may be instances when information must be shared, such as students up to the age of 16 who are in danger of harm.

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 student. This also ensures continuity of care should staff absence occur and provides opportunities for ideas and support.   
Parents 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.

# 13.0 Whole school approach

## 13.1 Working with parents/carers

If it is deemed appropriate to inform parents there are questions to consider first:

* Can we meet with the parents/carers face-to-face?
* Where should the meeting take place – some parents are uncomfortable in school premises so consider a neutral venue if appropriate.
* Who should be present – students, staff, parents etc.?
* What are the aims of the meeting and expected outcomes?

We are mindful that for a parent, 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. At the end of the meeting, lines of communication should be kept open should the parents have further questions or concerns. Booking a follow-up meeting or phone call might be beneficial at this stage.

Ensure a record of the meeting and points discussed/agree are added to CPOMS and an Individual Care Plan created if appropriate.

## 13.2 Supporting parents

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 resources/services which promote 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, parentmail etc.);
* Offering support to help parents or carers develop their parenting skills. This may involve providing information or offering small, group-based programmes run by community nurses (such as school nurses and health visitors) or other appropriately trained health or education practitioners; and
* 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. This will include support to participate in any parenting sessions, by offering a range of times for the sessions or providing help with transport and childcare. We recognise this might involve liaison with family support agencies.

# 14.0 Supporting Peers

When a student is suffering from mental health issues, it can be a difficult time for their friends who may want to support but do not know how. To keep peers safe, we will consider on a case by case basis which friends may need additional support. Support will be provided in one to one or group settings and will be guided by conversations by the student who is suffering and their parents with whom we will discuss:

* What it 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

# 15.0 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. Nominated members of staff will receive professional Mental Health First Aid training.

The DMHL and Designated Safeguarding Lead will run regular training to keep staff informed and up to date with mental health issues, support and services. The DMHL will also share any training opportunities brought to their attention with all staff. Teachers will be encouraged to build links with local and specialist services to keep their knowledge and practice up to date.

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. All staff received Blue Mental Health Support education in September 2024.

Suggestions for individual, group or whole school CPD should be discussed with the headteacher of mental health lead who can also highlight sources of relevant training and support for individuals as needed.

# 16.0 Policy Review

This policy will be reviewed every two years as a minimum. The next review date is **9.9.26** In between updates, the policy will be updated when necessary to reflect local and national changes. This is the responsibility of Lucinda Thompson. Any personnel changes will be implemented immediately.