Trinity Church of England School



Mental Health & Wellbeing Policy

Date Governor Approval	Date of next review	Notes
	November 2018	
March 2019	March 2022	





Trinity School

Mental Health and Wellbeing Policy Trinity Church of England School

Last Updated March 2019

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 Organization)

In our school our Christian vision shapes all we do. The Trinity community will live "life in all its fullness" by:

- ✓ Establishing a unique and personalised learning journey through Trinity and beyond
- Continuing to nurture our warm and caring family environment to support all to flourish
- \checkmark Inspiring all to achieve and celebrate ongoing and future successes.

In addition we aim to promote positive mental health for every member of our staff and pupil body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable pupils.

In addition to promoting positive mental health and wellbeing, we aim to recognise and respond to need as it arises. By developing and implementing practical, relevant and effective mental health and wellbeing policies and procedures we can promote a safe and stable environment for pupils affected both directly, and indirectly by mental health and wellbeing issues.

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 and governors.

This policy should be read in conjunction with our medical policy in cases where a pupil's mental health and wellbeing overlaps with or is linked to a medical issue and the SEND policy where a pupil has an identified special educational need.

The policy aims to:

- Promote positive mental health and wellbeing in all staff and pupils
- Increase understanding and awareness of common mental health issues

- Alert staff to early warning signs of poor mental health and wellbeing
- Provide support to staff working with young people with mental health and wellbeing issues
- Provide support to pupils 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 pupils. Staff with a specific, relevant remit include:

Steven Gallears - Designated Child Protection / Safeguarding Officer Steven Gallears - Mental Health and Emotional Wellbeing Lead Helena Dillon and Claire Kyriakides - Lead First Aider (also a Mental Health First Aider) Anna Lewis, Shelley Simpson and Ashley Downes – Mental Health First Aiders Claire Kyriakides and Ewan Williams - Pastoral Lead Clare Shoobrook, Marie Buckley and Darren Janes - CPD Lead Claire Kyriakides and Fidelma Hanlon - Head of PSHE

Any member of staff who is concerned about the mental health or wellbeing of a pupil should speak to the Mental Health Lead (or Mental health First Aider) in the first instance. If there is a fear that the pupil is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the Designated Child Protection Office staff or the head teacher. If the pupil 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 Steven Gallears/Shelley Simpson/Anna Lewis/Claire Kyriakides. To refer to CAMHS please enter an entry on 'MyConcern' stating your concerns and this will be actioned by the team. Please also be aware that parents can self-refer to CAMHS or see their GP.

Individual Care Plans

It is helpful to draw up an individual care plan for pupils causing concern or who receives 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 and Wellbeing

The skills, knowledge and understanding needed by our pupils 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 pupils to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

We will follow the PSHE Association Guidance¹to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

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 A.

We will display relevant sources of support in communal areas and toilets and will regularly highlight sources of support to pupils within relevant parts of the curriculum. Whenever we highlight sources of support, we will increase the chance of pupil help-seeking by ensuring pupils 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 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 using 'My Concern' where this will then be triaged by an appropriate school lead.

¹ Teacher Guidance: Preparing to teach about mental health and emotional wellbeing URL= https://www.pshe-

association.org.uk/curriculum-and-resources/resources/guidance-preparing-teach-about-mental-health-and (accessed 02.02.2018)

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 secretively
- Lateness to or absence from school
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

Managing disclosures

A pupil 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 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 advice and our first thoughts should be of the pupil's emotional and physical safety rather than of exploring 'Why?' For more information about how to handle mental health disclosures sensitively see Appendix B.

All disclosures should be recorded in writing and held on the pupil's confidential file (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 recorded on My Concern, allowing the team to then offer support and advice about next steps.

Confidentiality

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

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

We should never share information about a pupil without first telling them. Ideally, we would receive their consent, though there are certain situations when information must always be shared with another member of staff and / or a parent. Particularly if a pupil is in danger of harm.

It is always advisable to share disclosures with a colleague, usually the Mental Health and Emotional Wellbeing Leads, this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the pupil, it ensures continuity of care in our absence and it provides an extra source of ideas and support. We should explain this to the pupil and discuss with them who it would be most appropriate and helpful to share this information with.

Parents should be informed if there are concerns about their mental health and wellbeing and pupils may choose to tell their parents themselves. If this is the case, the pupil should be given 24 hours to share this information before the school contacts parents (unless the school feels there is any imminent danger to the child). We should always give pupils the option of us informing parents for them or with them.

If a child gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but the DSL must be informed immediately.

Working with Parents

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

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 should be accepting of this (within reason) and give the parent time to reflect.

We should 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 should 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 on My Concern.

Working with All Parents

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 information evenings
- Keep parents informed about the mental health topics their children are learning about in PSHE and share ideas for extending and exploring this learning at home

Supporting Peers

When a pupil 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. 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 by the pupil 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 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 in order to enable them to keep pupils safe.

We will host relevant information on My Concern for staff who wish to learn more about mental health. The MindEd learning portal provides free online training suitable for staff wishing to know more about a specific issue.²

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 pupils.

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 our CPD Coordinators who can also highlight sources of relevant training and support for individuals as needed.

Policy Review

This policy will be reviewed every 2 years as a minimum. It is next due for review in January 2021.

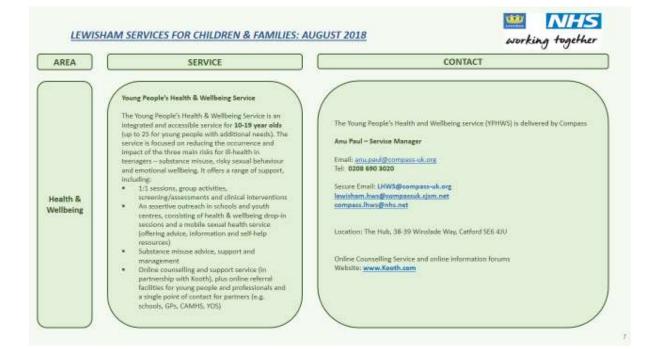
Additionally, this policy will be reviewed and updated as appropriate on an ad hoc basis. If you have a question or suggestion about improving this policy, this should be addressed to Steven Gallears our mental health lead in person or via email s.gallears@trinity.lewisham.sch.uk.

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

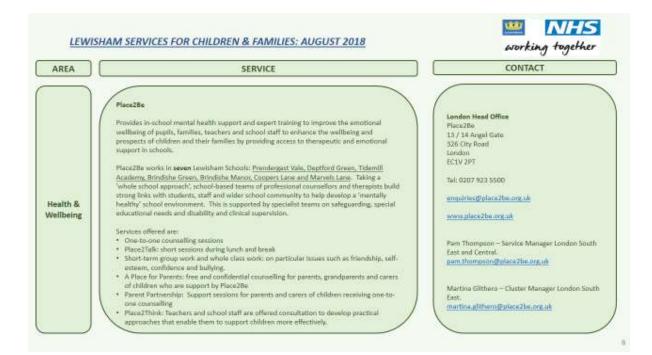
APPENDIX A

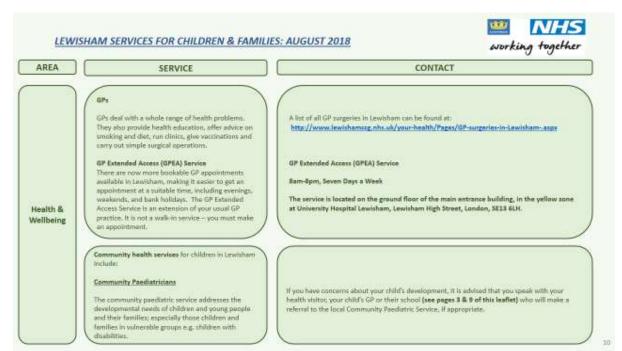
² www.minded.org.uk [accessed 02/02/18].

UNIO NHS LEWISHAM SERVICES FOR CHILDREN & FAMILIES: AUGUST 2018 working together AREA SERVICE CONTACT If you have concerns about your child's mental health, it is advised that you speak with your child's GP or school, who will make a referral to the local Child and Adolescent Mental Health Services (CAMHS) C. munity CAMHS CAMHS service: If ann CAMH5 are a specialised multi-disciplinary service, who provide mental health interventions for more severe complex or persistent mental health disorders for children and young If you are a professional that has concerns about a child's emotional / mental health and you are unclear about the referral process, you are advised to contact the CAMHS Duty Team at Kaleidoscope people up to are 18 (or up to 21 where a child is leaving care). In Lewisham Community CAMHS are separated into six Tel: 020 7138 1250 specialist teams: • Altts (forwnsic) DYPS (Emerging Psychosis) SYMBOL (Children looked after) Horizon (Generic referrals) Health & Wellbeing Neuro-Development (Disabilities) Crisis Team (hospital admissions) For all queries relating to the **Eating Disorder** concerns, contact the Eating Disorder Service (based at South London and Maudsley NHS Foundation Trust) Tall: 020 3228 2545 – where clinical staff are available between Mondey/Friday, Eating Disorders Where there is concern in relation to an eating disorder it is advisable to complete medical investigations (blood, weight, height atc.) via the GP. Sam-Spm (Sam - Spm for referrals only) Young people and parents can make self-referrals using this phone line or by visiting the following webpages https://www.mational.slam.nhs.uk/services/camhs/camhs-catingdisorders/ https://www.maudoleycentre.cyp-catingdisorders.co.uk/ If you would like to discuss concerns with a mental health professional, please use the Eating Disorder Helpline, which is open to parents / carers, young people and professionals. Self-referrals can be made via telephone or via the website.



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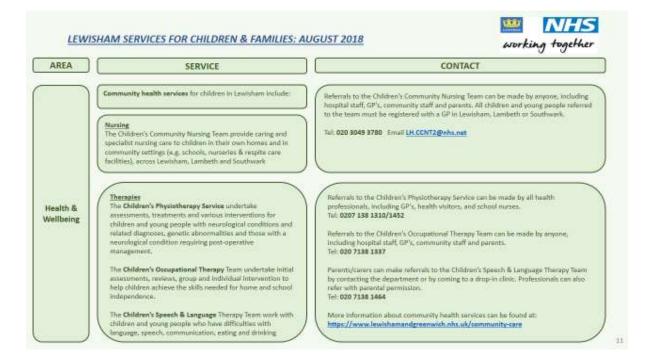




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APPENDIX B

Potential conversation starters:

• You don't seem your usual self today. Would you like to talk about anything?

• You look sad/worried today. Do you want to have a chat about it/is there anything I can do to help?

• You said something interesting in circle time/during lesson about how you felt when... How do you feel about it now?

Points to remember:

• Find an appropriate time and relaxed place to have the conversation.

• If a child discloses in class, offer empathy, invite them to talk in a safer, more private setting and talk to your designated safeguarding lead (DSL) for advice about how the situation should be managed.

• If you invite a young person to tell you their personal issues, be clear what you will do with this information. Consider how you will respond if asked 'not to tell anyone'.

• Sit on a low chair if you can - so there is less height difference and you will be more approachable.

• Check with the child if there are other trusted adults (parents, the wider family, teachers) or friends they have talked to or could talk to.

• Listen carefully, be patient and friendly and give your full attention.

• Check your body language so that the child knows you are focusing on them.

• Take what they're saying seriously. Don't over-react but don't try to minimise or dismiss what they are saying. Ask open questions to encourage them to talk.

• Be calm and acknowledge their feelings.

• For young children drawing, modelling or playing with toys while the conversation is progressing can be helpful.

• Offer empathy and understanding rather than solutions. When a child receives empathy they begin to develop trust.

• Remember we are all different and children will respond in their own unique way to their experiences.

• Remember that children with SEND (special educational needs & disability) may struggle even more to articulate their feelings and thoughts and may need extra support.

Note: When protecting and supporting children, there are always limits to confidentiality. Talk to your designated safeguarding lead (DSL) if you are at all concerned and follow your school's safeguarding policy/procedures. Make sure the child knows you may seek advice or guidance from other professionals.

Provision map:

At Trinity we provide the following services to support the mental health of our pupils and staff.

- We work with outside agencies CHAMS, XLP counselling, Drama therapy
- Staff well-being group, well-being INSET and dedicated time given to support staff
- Mindfulness for both staff and pupils
- Work done with our young carers
- Peer mentoring
- 'My Concern' is used to support safeguarding and train staff on relevant contextual issues
- Play Therapist (on site one day a week) in the Primary phase
- Reflection Room run by Mental Health First Aider in the Primary phase
- Weekly drop in sessions run in the Secondary phase counsellor
- Individual counselling sessions (by referral)
- Whole School Worship and class Worship topics
- Personal development days often have a PSHE/SMSC and wellbeing focus
- Having Mental Health 1st Aiders on both sites
- Posters around school promoting mental health awareness
- SEN (SEMH) morning interventions targeting specific pupils (EG draw and talk, emotional regulation)
- Academic mentoring for individual pupils and groups
- Restorative Justice is a central part of our behaviour and attitudes policy and strategy
- Year Progress Leaders and Family Group Leaders work with individual secondary pupils
- Highlighting mental health awareness in our school newsletter
- Online safety and wellbeing information on the website and in school newsletters
- Online safety training for parents, staff and pupils