

Chellaston Academy

Mental Health and

Wellbeing Policy



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| Policy Owner: | Kate Skinner | Date of Adoption: | 9/24 |
| Approved By: | Chellaston LGB | Date of Approval: | 09/24 |
| Signed By: | P. Smith | Date of Next Review: | 09/25 |

Why is Mental Health and wellbeing important?

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.

Our Rationale:

At our school, we are committed to the protection and promotion of positive mental health for our whole school community. We will continuously endeavour to improve the mental health of the school community by utilising a whole school approach to mental health, and via the identification and implementation of positive processes and practices which promote good mental health and wellbeing.

In addition to promoting positive mental health, we recognise that one in six children and young people and one in six adults may meet the criteria for a diagnosable mental health problem, with emerging evidence of a recent rise in anxiety and depression in some groups. 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.

We will:

- Support students to understand their emotions so that they feel empowered to make informed choices.
- Help children to manage change and adversity and develop resilience.
- Provide an environment which is conducive to students and staff sharing concerns about themselves or others. Children should be able to talk openly with trusted adults about their problems without feeling any stigma.
- Ensure that all feel and are valued so that they have a sense of belonging and feel safe.
- Ensure that a range of services are provided which improve the physical, emotional and sexual health and wellbeing of our students and staff.

We will promote a mentally healthy school environment by:

- Promoting key events across the academic year, like Children's Mental Health Week (held every year in February), World Mental Health Day (held every year on 10 October) and Mental Health Awareness Week (held in May).
- Providing CPD opportunities for staff on mental health and wellbeing to give them the confidence to help spot and intervene with mental health and wellbeing issues.
- Including mental health and wellbeing in weekly SLT newsletters to raise awareness of signs and symptoms.
- Regular engagement with parents and carers of our community with things such as Parent coffee mornings and Mental Health evening meetings.
- Having wellbeing as a weekly timetabled form session thus giving pupils regular opportunities to talk about mental health and wellbeing and complete invaluable emotional work.
- Encouraging pupils to look after their own mental health and wellbeing where they are able to through key initiatives.
- Supporting students by identifying their need according to our IGR and providing relevant intervention.

- Valuing and celebrating non-academic achievements for both staff and students.
- Teaching the skills, knowledge and understanding our students need to keep themselves and others physically and mentally healthy and safe as part of our developmental RSHE curriculum.
- Following 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.

Lead Members of Staff

We believe that all staff have a responsibility to promote positive mental health, and to understand about protective and risk factors for mental health. Some children will require additional help and all staff should have the skills to look out for any early warning signs of mental health problems and ensure that children with mental health needs get early intervention and the support they need.

All staff understand about possible risk factors that might make some children more likely to experience problems, such as: physical long-term illness, having a parent who has a mental health problem, death and loss, including loss of friendships, family breakdown and bullying. They should also understand the factors that protect children from adversity, such as self-esteem, communication and problem-solving skills, a sense of worth and belonging and emotional literacy.

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

- Phil Smith- Headteacher
- Dani Eyre – DSL, Pastoral Lead and Deputy Head.
- Laura Horvath- DDSL.
- Joanne Amps- Designated child protection / safeguarding officer.
- Kate Skinner- Mental health lead / senior mental health lead
- Laura Jones - Pastoral lead
- Debbie Burdis- Wellbeing Officer.

Staff who are 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 child protection officer, the head teacher or the designated governor.

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 one of the team above. (Our integrated graduated response (IGR) is shown in Appendix 2)

The Employer/Governing Body shall:

- Ensure this policy is implemented and procedures are in place that recognise and deal with the issue of common mental and physical health problems.

The Headteacher and leaders of the school shall:

- Foster a supportive work environment, operating in a fair and consistent manner.

- Understand the differing needs of staff, at different points and events during their life cycles, and offer support accordingly, if and when required. This may include support for pregnant women, older women during the menopause, and those with caring responsibilities.
- Follow agreed procedures when there are concerns or absence due to work related stress and other mental-health problems.
- Ensure that a return-to-work policy is established in the workplace that is supportive of staff both while absent and upon return to work.
- Carry out a risk assessment, where necessary, and especially when concerns have been raised, as soon as possible.

Identification:

Early Identification

Our identification system involves a range of processes. We aim to identify children with mental health needs as early as possible to prevent things getting worse. We do this in different ways including:

- CPOM's- staff should notify the wellbeing team of concerns regarding a child's wellbeing or mental health by completing a log on CPOM's.
- Utilising our IGR wellbeing pathway (see Appendix 2). This will ensure accurate referrals and to allow effective intervention/support to take place.
- Analysing behaviour, exclusions, visits to the medical room/school nurse, attendance and sanctions. Using trends to inform planning of intervention and staff training.
- Analysing WEMWBS survey results each term.
- VSM- Pupil progress review meetings.
- Gathering information from a previous school as part of the transition process.
- Parents evenings.

All members of staff have responsibility for student mental health and wellbeing, with Subject Leads having a clearly defined role in supporting staff wellbeing.

Appendix 1:

How was the policy developed?

In developing this policy, we have taken account of:

- Children and Young People's Wellbeing: State of the Nation February 2022.
- Education, Education, Education, Mental Health 2016 (secondary).
- Promoting children and young people's emotional health and wellbeing, Public Health England 2021.
- Preparing to teach about mental health, PSHE Association 2021.
- Mental Health and Behaviour in Schools, DfE 2018.
- Supporting children with medical conditions, DfE 2017.
- COVID-19 mental health and wellbeing surveillance report: Chapter 4. Children and Young People, Office for Health Improvement and Disparities 2022.

Inclusion Graduated Response

| Universal | Tier 1 – Additional interventions | Tier 2 – Targeted interventions | Tier 3 – Specialist intervention |
|---|---|---|--|
| <i>Possible triggers =</i> | <i>5 days absence, lateness, change in behaviours or mood.</i> | <i>Risk of PA – 10 days absence, persistent lateness, trauma, suspensions.</i> | <i>Continued decline in attendance, repeat suspensions, safeguarding incident.</i> |
| <p>Support, interventions and assessments that all students have access to.</p> <p>Coordinated across the year as part of curriculum and co-curricular offer.</p> | <p>Some emerging needs where short-term or low-level intervention may be required to address need. Regularly reviewed with the aim to return to Universal support where possible.</p> | <p>Escalating needs where additional interventions have not fully met the need or longer-term support is required. Additional formalised assessment may be required.</p> <p>Regular reviews with an aim to reduce unmet needs and improve outcomes.</p> | <p>Complex needs requiring more intensive or specialised support. Multi-agency approach (Mainstream/SEND/Connect/ Social Care/Therapeutic/Parent/external providers, etc...)</p> <p>Regular Assessment and review with an aim to step down level of care or to prepare for life beyond school.</p> |

| | | | + TIER 3 SPECIALIST SUPPORT |
|--|---|--|---|
| | | + TIER 2 TARGETED SUPPORT/ACTIONS | + TIER 2 TARGETED SUPPORT/ACTIONS |
| | + TIER 1 ADDITIONAL SUPPORT/ACTIONS | + TIER 1 ADDITIONAL SUPPORT/ACTIONS | + TIER 1 ADDITIONAL SUPPORT/ACTIONS |
| UNIVERSAL WHOLE SCHOOL | UNIVERSAL WHOLE SCHOOL | UNIVERSAL WHOLE SCHOOL | UNIVERSAL WHOLE SCHOOL |
| INTERVENTIONS / THERAPIES / SUPPORT | | | |
| <ol style="list-style-type: none"> 1. A culture of Integrity, Care and Excellence for all 2. Meet & Greet 3. A focus on reparation and individualised responses to help students learn how to self-regulate and improve their choices 4. Form Tutor & Pastoral Care 5. An ambitious, broad and balanced curriculum inc. Personal Development and co-curricular opportunities 6. Wellbeing drop-in sessions 7. Signposting to Kooth, Young Minds, ChatHealth and other support 8. Careers support 9. Rewards/ICE events and shop 10. Positive calls home 11. Homework Club <p>Potential follow up</p> <ol style="list-style-type: none"> 12. SEND Concern Referral 13. Buddy / RICE Room 14. Loss of social time (LOST) 15. 'Community service' 16. Loss of privileges (e.g. Prom) 17. Same-day (after-school) detentions 18. Reparation Conversations 19. Phone calls home | <p>Learning</p> <ol style="list-style-type: none"> 1. SEND Monitoring 2. Literacy support 3. Passes - sensory, boxing, reset 4. Fidget toys 5. Positive reward card 6. Reader Leader 7. 9 for 9 8. English pre-read <p>Relationships</p> <ol style="list-style-type: none"> 9. Positive Report – tutor or DHOY 10. Parent meetings <p>Wellbeing</p> <ol style="list-style-type: none"> 11. Wellbeing Peer mentor 12. Hub- talking appointment 13. School Health drop-in 14. Changing Lives – group session 15. School dog <p>Attendance</p> <ol style="list-style-type: none"> 16. Student meeting - Tutor/DHOY 17. Bespoke recognition target | <p>Learning</p> <ol style="list-style-type: none"> 1. SEND Passport 2. SEND Link 3. SEND register - K Code 4. Blended TT - internal 5. Speech and Language Therapy intervention 6. Autism support 7. Specialist Dyslexia Teaching 8. EHCP started 9. Lexia 10. EAL Interventions 11. Numeracy 12. Aspire 13. English pre-read 14. Prep for Adulthood 15. Phonics 16. Reading fluency <p>Relationships</p> <ol style="list-style-type: none"> 17. Report – HOY or SLT 18. SBIP 19. Risk Assessment 20. Lego Therapy 21. Social Skills 22. Zones of Regulation 23. Emotional Literacy Support 24. TFTF 25. DCCT 26. 'Partnership working' (seclusion) at local school <p>Wellbeing</p> <ol style="list-style-type: none"> 27. Inclusion Meeting Agenda 28. Inclusion support Plan 29. Anxiety Gremlins 30. School health 31. Breakout 32. Changing Lives – 1-1 or CBT referral 33. Choices 34. School Counsellor 35. Drawing and Talking 36. Mental Health Skills Programme | <p>Learning</p> <ol style="list-style-type: none"> 1. Nurture Group 2. Occupational Therapy 3. PLP in place and reviewed termly 4. Sensory Audit 5. EHCP in place 6. Enhanced Transition - WRAT, WRIT, CTOPP, KTEA, DASH 7. Blended or PTTT inc Alternative Provision 8. Forest School <p>Relationships</p> <ol style="list-style-type: none"> 9. Panel Meeting 10. Connect placement 11. Fresh Start / Fresh Start+ 12. Commissioned AP places 13. Baby People 14. Island Project 15. Whispering Trees 16. Kingsmead 17. Jct 16 inc Equine Therapy 18. Engineered Learning 19. YOT support 20. Permanent Exclusion <p>Wellbeing</p> <ol style="list-style-type: none"> 21. MAT– Multi Agency Team 22. Specialised external intervention: Lunar Minds CAMHS Catharsis Bridge the Gap <p>Attendance</p> <ol style="list-style-type: none"> 23. Attendance Support Plan / Contract 24. EWO support 25. Blended or PTTT |

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| | | <p>37. Safety (consent/internet safety)</p> <p>38. Self-harm intervention - Harmless</p> <p>Attendance</p> <p>39. Reasonable adjustments</p> <p>40. Student/Parent meeting – Attendance Support Officer</p> <p>41. Attendance Review meeting / Attendance Risk Register</p> | |
| ASSESSMENTS | | | |
| <p>Dyslexia screener – on entry</p> <p>Dyscalculia screener – on entry</p> <p>NGRT – on entry – retest</p> <p>Year 9</p> <p>Lucid Exact Screening – Year 7, 9, 12</p> <p>Tranquility App - Weekly</p> <p>WEMWBS – every term</p> | <p>Dyslexia Screener</p> <p>Dyscalculia Screener</p> <p>Inclusion Assessment Session</p> | <p>SALT Assessment</p> <p>SPOA</p> <p>Exam Access Assessment</p> <p>Domain analysis</p> <p>ADHD/SEMH - Vanderbilt</p> <p>SEMH – Coping in School Scale</p> <p>SEMH – BOXALL Profile</p> <p>SEMH – RCADS (Anxiety/Depression)</p> <p>SDQ</p> <p>ATTEND tool</p> <p>Risk assessments</p> | <p>TAF held to coordinate support plan.</p> <p>Clinical Psychologist assessment</p> <p>Educational Psychologist assessment</p> <p>EHA (Early Help Assessment)</p> <p>EHCP (Education Health Care Plan assessment)</p> |