

Promoting positive mental health and wellbeing



Bottisham Village College

This policy document is the outcome of a collaboration between Bottisham Village College and the CAMH Learning and Development team, Cambridgeshire and Peterborough NHS Foundation Trust.

It is intended as a template for other secondary schools and will therefore be made available across the county. Recommendations for adaptations for Primary Schools will be made available in due course.

However, it is not meant to be adopted without due process and careful and thorough consideration of the individual school's needs in relation to the emotional wellbeing and mental health of its pupils and staff.

It is important that it embodies and reflects the school's own culture since it will provide a window through which others will understand its ethos and approach in relation to these issues.



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Promoting positive mental health and wellbeing

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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, 2014)

At our college, we aim to promote positive mental health for every member of our staff (see Appendix G) and student body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable students.

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. In an average class of 30, 15 year-old students:

- Three could have a mental disorder
- Ten are likely to have witnessed their parents separate
- One could have experienced the death of a parent
- Seven are likely to have been bullied
- Six may be self-harming

(Promoting children and young people's emotional health and wellbeing, a whole school and college approach. Public Health England, March 2015)

By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for students affected both directly, and indirectly by mental ill health. (Appendix B and C)

Scope

As part of our overall safeguarding strategy, 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, volunteers, visitors and governors.

This policy should be read in conjunction with our medical policy in cases where a student'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.

Other related policies include:

Anti-bullying policy
PSHE and SRE policy
Safeguarding policy
Behaviour policy
Attendance Policy
Staff wellbeing policy
Confidentiality Policy
Lone working policy



The Policy Aims to:

- Promote positive mental health in all staff and students to enable everyone to thrive
- Increase understanding and awareness of common mental health issues to facilitate early intervention (see Appendix A)
- 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 students 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 students, Staff with a specific, relevant remit include:

- Jenny Rankine (Principal) and CLT - designated child protection / safeguarding officer
- Dom Fullman – safeguarding lead
- Camilla Saunders - SENCo and mental health lead

Any member of staff who is concerned about the mental health or wellbeing of a student should speak to the safeguarding lead/CLT line manager 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. If the student 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. Safeguarding protocols should be followed.

Where a referral to CAMHS is appropriate, this will be led and managed by members of the College Leadership team. Guidance about referring to CAMHS is provided in Appendix F.

Individual Care Plans

It is good practice to draw up an individual care plan, which is regularly reviewed, for students causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the student, the parents and relevant health professionals with the SENCO/HOL/CLT line manager as required. This can include:

- Details of a student'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
- Existing role played by other professionals
- Identifying the gap and mitigate accordingly

Teaching about Mental Health

All staff have a responsibility to support social and emotional development, to build resilience and promote wellbeing through the wider curriculum.

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 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 students to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

We will follow the PSHE county framework and Health Education Partnership guidance to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

Any concerns raised/comments made by students during PSHE sessions will be referred to the Designated Person following safeguarding protocols (see warning signs and managing disclosures below).

Signposting

We will ensure that staff, students 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 D.

We will display relevant sources of support in communal areas such as corridors, offices and toilets. We will also regularly highlight sources of support to students within relevant parts of the curriculum and during assemblies and to parents at e.g. information evenings. Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring students understand:

- Who to turn to for help
 - What help is available
 - Who it is aimed at
 - How to access it
 - Why to access it
 - What is likely to happen next
-
- **Safeguarding disclosures:** Any trusted adult
 - **Friendship/ worries or problems family/general:** Pastoral support workers/form tutor
 - **Young carers:** Identified by HOL, passed onto Young carers' team
 - **Resilience group:** Referrals through SENCo
 - **Emotional support:** Learning support team offer emotional support to individuals who have SEND or emotional needs etc. before school, break and lunchtime
 - **Pastoral support team** offers appointments for students on waiting list for Centre 33 with guidance from school nurse
 - **Drop- in** for sexual health concerns, confidential or friendship problems, one-off advice. Wednesday and Friday break times in Locality



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 by using safeguarding procedures. Concerns should all be logged on 'Cause for concern forms' held in student reception.

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
- A change in behaviour
- 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
- Difficult or dangerous behaviour

Managing disclosures

A student 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 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 listen, rather than advise and our first thoughts should be of the student's emotional and physical safety rather than of exploring 'Why?' Information about how to handle mental health disclosures sensitively is suggested in Appendix E.

All disclosures should be recorded on a 'cause for concern form' and held confidentially. 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 designated person who will provide support and advice about next steps, and who will make a referral to CAMH as required. (See Appendix F for guidance about making a referral to CAMHS)

Confidentiality and consent

We should be honest with regards to the issue of confidentiality. If we feel there is a risk to self or others, it is necessary for us to pass our concerns about a student on due to safeguarding. We should discuss with the student:

- Who we are going to talk to
- What we are going to tell them
- Why we need to tell 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. We will work in accordance with 'Keeping Children Safe in Education 2016' and the school's safeguarding and child protection policy.

Child protection information will be stored and handled in line with the Data Protection Act 1998 principles. The Data Protection Act does not prevent school staff from sharing information with relevant agencies, where that information may help to protect a child.

The Designated Safeguarding Lead will take advice from the Information Governance Team and together a decision will be made about what information to share. This decision will consider the balance between the potential risk to the child and the principle of working openly and honestly with parents.

It is always advisable to share disclosures with the designated safeguarding 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 should explain this to the student and discuss with them who it would be most appropriate and helpful to share this information with. A log of concern should be held in the central safeguarding file.

Working with All Parents and Carers

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, agencies, and how to access 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

Working with Individual Parents and Carers

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?
- Where should the meeting happen?
- Who should be present? (Consider parents, the student, other agencies, other members of staff).

- What are the aims of the meeting?
- The Designated Person should consider whether the lone working policy be referred to/risk assessment completed?

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 are 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 of the meeting on the child's confidential record.

Supporting Peers

When a student 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 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 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

All staff will receive training about recognising and responding to mental health issues as part of their regular safeguarding training in order to enable them to keep students safe. As part of personal development, staff can request training on issues that would enhance their skills and knowledge.

Policy Review

This policy will be reviewed annually. Additionally, this policy will be reviewed and updated as appropriate on an ad hoc basis to reflect change e.g. personnel changes. This policy has been authorised by the Governors, is addressed to all members of staff and volunteers, is available to parents on request and is published on the school website. This policy can be made available in large print or other accessible format if required. It applies wherever staff or volunteers are working with pupils even where this is away from the school, for example on an educational visit.

Next review date September 2019

Emotional Health and Wellbeing Services for children, young people and families

The Thrive Model: service groupings are delivered on a continuum to meet individuals' needs - they are not mutually exclusive

Getting Advice: signposting, self-management and online and community support for mild/temporary difficulties, or those with chronic or ongoing severe issues choosing to manage their own health.

School Nursing
Cambridgeshire: 0300 029 5050
Peterborough: 01733 466620

Emotional Wellbeing Practitioners (EWPs)

Children's Wellbeing Practitioners (CWP) – brief, focused, evidence based low intensity support

Self-help websites:
<http://www.keep-your-head.com/cwp>
<https://kooth.com/>
<https://www.mindmed.org.uk/>

GPs

HYPAs Clinics

CPN Project for Schools

Getting Risk Support:
Managing risk and delivery of crisis services e.g. to those routinely in crisis but who are unable to make use of help offered, those self-harming, or with emerging personality disorders or ongoing issues that have not yet responded to treatment.

CPSL Mind – The Sanctuary

First Response Service

Getting Help: brief, goal/outcome focused, evidence based interventions for anxiety, depression, PTSD, self-harm or life events e.g. bereavement, family breakdown, bullying where these are having significant adverse effects.

Kooth direct access to an online counselling service <https://kooth.com/>

CHUMS – brief psychological interventions for children and young people aged 4-18 in Peterborough/4-25 in Cambridgeshire

Early Help Services/Hub: access to services is via a completed early help assessment (EHA). Email for triage to appropriate service to:
Cambs: early.help@cambridgeshire.gcsx.gov.uk (for professional consultation prior to completing EHA contact the Hub on 01480 376 666).
Peterborough: earlyhelp@peterborough.gov.uk (for further info. visit local offer pages at www.peterborough.gov.uk)

Getting More Help: Targeted, extensive long term treatment for individuals and families. May include inpatient and/or outpatient services. Systemic family interventions may be appropriate.

CPFT Cameo, CAMEO North (covering Fenland, Huntingdon, Peterborough), CAMEO South (covering Cambridge South and Cambridge North)

CAMHS pathway. Moderate to severe mental health needs e.g. significant thoughts/intention of deliberate self-harm or suicide or symptoms that affect function/participation in daily activities
CAMHS Eating Disorder Pathway. Moderate to severe anorexia or bulimia or avoidant and restrictive food intake disorder
CAMHS Neurodevelopment/Learning Difficulties Pathway
CAMHS In Patient Unit

ALL CAMHS SERVICES CAN BE ACCESSED VIA THE CAMHS SINGLE POINT OF ACCESS (SPA) ON 01480 428115



***Please note** that in the Getting Advice Service grouping, the CPN project for schools and the HYPAs Clinics are in Peterborough only

Process for clarifying the nature of the Suicide Risk to determine response

