



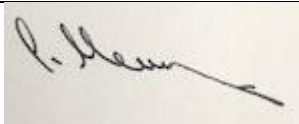

**Barking Abbey School**

**Emotional and Wellbeing Policy**

**Policy Adoption**

Date	Reviewed/Adopted by	Next review date	Review Frequency
October 2022	Full Governing Body	Autumn Term 2023	Annually

**Governing Body Approval**

Signed	Title
	Chair of Governors
	Headteacher

## **Aims**

- Provide information on how we will promote positive mental health
- Provide information on how we will try to prevent poor mental health in our children
- To provide staff with an understanding of the different elements of mental health
- Provide staff with guidelines for supporting a child or young person experiencing poor mental health
- How we will provide the support necessary for children and young people and safeguard their physical, emotional, and mental wellbeing

## **Scope and links to other policies**

- This is a guide to all staff – including non-teaching and governors – outlining our approach to promoting mental health and emotional wellbeing. It should be read in conjunction with our policies on Safeguarding, Medical Needs, Anti-Bullying, SEND and Equalities. Links with the School's Behaviour Policy are especially important because behaviour, whether it is disruptive, withdrawn, anxious, depressed or otherwise, may be related to an unmet mental health need.

## **Introduction and context**

At Barking Abbey School, we aim to promote positive mental health and wellbeing for our whole school community (children, staff, parents, and carers), and recognise how important mental health and emotional wellbeing is to our lives in just the same way as physical health. We recognise that children's mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. All children go through ups and downs during their school career and some face significant life events.

School staff are often the key professionals when it comes to identifying and supporting children and young people's mental wellbeing and are ideally placed to respond to the early signs of mental health difficulties in children and young people.

The Department for Education (DfE) recognises that: "in order to help their children succeed; schools have a role to play in supporting them to be resilient and mentally healthy". Schools can be a place for children and young people to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience. For some, school will be a place of respite from difficult home lives and offer positive role models and relationships, which are critical in promoting children's wellbeing and can help engender a sense of belonging and community.

## **A whole school approach to promoting positive mental health**

Our role in school is to ensure that children are able to manage times of change and stress, and that they are supported to reach their potential or access help when they need it. We also have a role to ensure that children learn about what they can do to maintain positive

mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues, and where they can go if they need help and support.

Our aim is to provide a safe environment to help develop the protective factors which enable children to express themselves and be listened to, build resilience to mental health problems and to be a school where:

- All children are valued.
  - Children have a sense of belonging and feel safe.
  - Children feel able to seek help and talk openly with trusted adults about their problems without feeling any stigma.
  - Positive mental health is promoted and valued.
  - Bullying is not tolerated.
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- Ensure the welfare and safety of children are paramount.
  - Early identification of children who may have mental health needs and planning support to meet their needs, including working with specialist services.
  - Involve parents and carers when their child needs support.
  - Involve children in the care and support they receive.
  - Monitor, review and evaluate the support with children and keep parents and carers updated.
  - Training staff to develop their understanding, knowledge and response to children with poor mental health.

As set out in the Schools colleague wellbeing strategy we also recognise the importance of promoting staff mental health and wellbeing. It is important to 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 underpinned by behaviour and welfare around the school.

*“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 his or her community” (World Health Organisation)*

Mental health and wellbeing is not just the absence of mental health problems. We want all children/young people to:

- • feel confident in themselves.
- • be able to express a range of emotions appropriately.
- • be able to make and maintain positive relationships with others.
- • cope with the stresses of everyday life.
- • manage times of stress and be able to deal with change.
- • learn and achieve.

### **Raising awareness – School response**

We believe the school plays a key part in promoting children and young people’s positive mental health and helping to prevent mental health problems.

This guidance aims to ensure all staff take responsibility to promote and raise awareness of this topic and support staff as much as possible to respond to children who are experiencing poor mental health. We are not expecting all staff to become experts in this field, but the initial response and identification is vital to a child's overall well-being and their recovery. It is important for children to know they can speak to any member of staff within the school; however, Jamie Gibson is our designated mental health lead, named members of the school staff who will provide support to children and young people if they are experiencing poor mental health.

Our school has developed a range of strategies and approaches to raise this issue and break down stereotypes and the stigma around mental health including:

For example

- Campaigns and assemblies to raise awareness of mental health.
- Peer mediation and Peer mentoring – children working together to solve problems and planned sessions where identified adults mentor a designated child
- Transition programmes to secondary schools which includes all Year 6 children having a staff mentor to support a smooth transition to secondary school
- Class activities
- Mental health counselling e.g. based on cognitive behavioural therapy
- Wellbeing week – whole school focus on doing things which make us feel good
- Displays and information around the school about positive mental health and where to go for help and support
- Nurture groups
- Resilience Training
- Student Mental Health Champions so Peer to Peer support

### **Staff roles and responsibilities, including those with specific responsibility**

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 experiencing this get early intervention and the support they need. If a member of staff is concerned about the mental health or wellbeing of a child or young person, in the first instance they should speak to their pastoral leader. We recognise the impact this can have on staff when supporting a child or young person with poor mental health. Staff will be provided with supervision to discuss the impact this is having on themselves, professionally and personally and to discuss any support of CPD may be required to ensure they are being supported adequately and therefore the child or young person receives the right support.

If there is a concern that the child or young person is at high risk or in danger of immediate harm, the school's child protection procedures should be followed. If the child or young person presents a high-risk medical emergency, your emergency first aid procedures should be followed, including involving the emergency services if necessary.

List of key people in our school and their roles in educating and supporting children with poor mental health

<b>Role</b>	<b>Name</b>
Well-being ambassador/lead	Mr S Leather
Inclusion Lead for Social, Emotional & Mental Health Needs and SENDCO	Ms L Casey
Leads on PSHE teaching about mental health	Ms N Bawla
Safeguarding/Child Protection Lead	Mr T Roe

### **Early identification and common symptoms and behaviours associated with poor mental health**

All staff understand 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 (see Appendix 2 on risk and protective factors).

As with most things, early identification is extremely important and can impact greatly on the support they receive and their recovery. At Barking Abbey School 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:

Examples include:

- Recognising and reporting the signs associated with poor mental health
- Analysing behaviour, exclusions, visits to the medical room/school nurse, attendance, and sanctions.
- ISM meetings (individual students are discussed by a group of professionals at school).
- Gathering information from a previous school at transfer.
- Enabling students to raise concerns to any member of staff.
- Enabling parents and carers to raise concerns to any member of staff.
- Counsellor, social worker drop-in sessions.

Any member of staff concerned about a student will take this seriously and talk to the Mental Health Lead and or the Designated safeguarding Lead, following this up with a report on the schools Child Protection reporting system. CPOMS or equivalent.

If there is a concern that a student is in danger of immediate harm, then the school's child protection procedures are followed. If there is a medical emergency, then the school's procedures for medical emergencies are followed.

### Signs and symptoms

Physical	Psychological	Behavioural
Fatigue	Anxiety or distress	Drug or alcohol misuse
Indigestion or upset stomach	Tearfulness	Using recreational drugs
Headaches	Feeling low	Withdrawal/Change in mood
Appetitive and weight changes	Mood changes	Resigned attitude
Joint and back pain	Indecision	Irritability, anger or aggression
Changes in sleep patterns	Loss of motivation	Over excitement or euphoria
Visible tension or trembling	Loss of humour	Restlessness
Nervous trembling speech	Increased sensitivity	An increase in lateness or absenteeism
Chest or throat pain	Distraction or confusion	Isolation from friends and family and becoming socially withdrawn
Sweating	Difficulty relaxing	Intense or obsessive activity
Constantly feeling cold	Lapses in memory	Repetitive speech or activity

Not want to do PE or get changed for PE	Illogical or irrational thought processes	Impaired or inconsistent performance
Wearing long sleeves in hot weather	Difficulty taking information in	Uncharacteristic errors
Physical signs of harm that are repeated or appear non-accidental	Responding to experiences, sensations or people not observable by others	Increased sickness absence
Repeated physical pain or nausea with no evident cause	Talking or joking about self-harm or suicide	Uncharacteristic problems with peers
	Expressing feelings of failure, uselessness or loss of hope	Apparent over reaction to problems
		Risk taking
		Disruptive or anti-social behaviour
		Secretive behaviour
		Falling academic achievement
		Appearing to have increased academic pressure

Staff are aware that mental health needs, such as anxiety, might appear as non-compliant, disruptive or aggressive behaviour which could include problems with attention or hyperactivity. This may be related to home problems, difficulties with learning, peer relationships or development.

### **Raising the issue, disclosures and confidentiality talking to students**

Whilst poor mental health is a sensitive and personal issue, shying away from the subject can perpetuate the fear of stigma and increase feelings of anxiety. Children and young people may not have the confidence to speak up, so a member of staff making the first move to open the dialogue will be key. Questions should be simple, open and non-

judgemental to give the child or young person ample opportunity to explain the situation in their own words. Mental ill health should be treated in the same way as someone with a physical health condition. There are also a number of excellent resources available from your Mental health lead. Tips to help open the conversation are included in Appendix 3.

If poor mental health is suspected or disclosed, it is crucial that someone facilitates an early conversation about this with the child or young person, to identify and implement appropriate support or adjustments. Staff need to ensure that they are seen as approachable and listen when children and young people ask for help.

Staff will make it clear to children that the concern may be shared with the Mental Health Lead or the Safeguarding Lead and recorded, in order to provide appropriate support to the student. Appendix 6 – Flow chart for responding to a mental health concern.

All reports are recorded and held on the school's electronic safeguarding system (CPOMS) and include action taken.

Confidentiality must never be promised however we must make it clear to children and young people that particular members of staff may well need to know this information about them. 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 are going to tell them
- How the information will be stored and who has access to the information

### **Informing and working with parents and carers**

The school will usually talk with both the child or young person and the parents or carers. We must be honest with regards to confidentiality. If it is necessary for us to pass on our concerns about a child or young person then 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

### **Supporting children, referring on and signposting**

When a student has been identified as having a cause for concern, it will be important to assess those needs and consider how they are best met. In some cases, the provision in school will be sufficient but on other occasions they may need to be referred on to other agencies. See Appendix 4 for how to make a quality referral. Once the child or young person is receiving support either through school, CAMHS or another organisation, it is recommended that an individual care plan should be drawn up. The development of the plan should involve the student, parent (if they are aware) and relevant professionals.

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 of the school and specific staff.

### **Signposting**

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

### **Support within school**

Examples:

Mental Health Ambassador

Learning Mentors

School counsellor

Access to a social worker

Notice boards, toilets, website, newsletters

### **External support (examples)**

GP referral/CAMHS

### **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 with the child or young person 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 or saying which may inadvertently cause upset
- 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

## **Curriculum**

Teaching about mental health and emotional wellbeing

A new training module for teachers will be published by Gov.uk week commencing 15th June 20 to support teaching in giving lessons on the Government's new Relationships, Sex and Health Education (RSHE) curriculum, which will make mental health and wellbeing a compulsory part of students' education in primary and secondary school.

Through PSHE we teach the knowledge and social and emotional skills that will help children and young people to be more resilient, understand about mental health and be less affected by the stigma of mental health problems.

We will follow the guidance issued by PSHE association to prepare us to teach about mental health and emotional health safely and sensitively.

Incorporating this into our curriculum at all stages is a good opportunity to promote children's and young people's wellbeing through the development of healthy coping strategies and an understanding of students' own emotions as well as those of other people. Additionally, we will use such lessons as a vehicle for providing children and young people who do develop difficulties with strategies to keep themselves healthy and safe as well as supporting children and young people to support any of their friends who are facing challenges.

## **Training and staff awareness and quality assurance**

All staff at Barking Abbey School have received this document and 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 children and young people safe.

For staff who require more in depth knowledge will be able to access training modules developed with clinical experts which will help subject leads and teachers deliver the new curriculum effectively when it becomes compulsory from September 20, as well as improving their confidence in talking and teaching about mental wellbeing in class, 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 students.

Where the need to do so becomes evident, we will host 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 (School Safeguarding and Child Protection Lead) / School CPD lead, who can help to source relevant training and support for individuals as needed.

Please note when sourcing training in house the following quality assurance principles should be applied; Taken from safeguarding training standards for Co-operative Academies.

We will endeavour to verify that any external trainers or speakers are suitable; for example, by seeking recommendations or feedback from other schools that have used the same trainer, by agreeing the content of the session beforehand, by checking company websites, by consulting where necessary with the school designated safeguarding and child protection lead etc. This helps us to ensure staff training is appropriate, up to date and valuable to participants and also to meet our responsibilities within Prevent.

### **Monitoring and evaluation**

This policy should be regularly reviewed and monitored as to its effectiveness. This should be done through feedback from staff, children and young people and parents and through cases management supervision of the key staff involved in the delivery of services to children at the school. Any required changes to the policy should be discussed with the Safeguarding and Child Protection Lead to ensure any changes and or improvements are equally reflected across the school.