

Emotional Resilience, Wellbeing and Mental Health Policy

Scholar Green Primary School



Emotional Resilience, Wellbeing and Mental Health Policy

Person responsible for the Policy:	L. Colman/J. Ashworth Confirmation that this Policy, in respect of Scholar Green Primary School, has been discussed and approved by the Governing Body.
Date Approved:	Revised Jan 25
Signed:	L. Colman
Date for Review:	January 2027

Definition of Mental Health and Well-Being

We use the World Health Organisation's definition of mental health and well-being:

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.

At Scholar Green Primary School we want all children to:

- Feel confident in themselves
- Be able to express a range of emotions appropriately
- Be able to 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
- To know and understand that 'it's okay not to be okay'

Each pupil and their well-being is unique and is approached in this way depending on the situation.

In some circumstances just talking and listening is required.

Others may benefit from a more structured programme.

Our Designated Mental health and well-being lead is available at all times for pupils/ staff and parents.

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1.0 Policy statement

At *Scholar Green Primary school*, we are committed to promoting positive mental health and emotional wellbeing to all students, their families and members of staff and governors. Our open culture allows students' voices to be heard, and through the use of effective policies and procedures we ensure a safe and supportive environment for all affected - both directly and indirectly - by mental health issues.

2.0 Scope

This policy is a guide to all staff – including non-teaching and governors – outlining Scholar Green 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.
- 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.

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:

- Lyndsey Colman- Designated Child Protection Officer/Safeguarding Lead/CPD Lead
- Caroline Yarwood- SENCO/Safeguarding Deputy
- Jayne Ashworth-Designated Mental Health Lead/Safeguarding Deputy
- Linda Hope-PSHE Lead/SMSC Lead

If a member of staff is concerned about the mental health or wellbeing of student, in the first instance they should speak to Lyndsey Colman.

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 Care Plans

When a pupil has been identified as having cause for concern, has received a diagnosis of a mental health issue, or is receiving support either through CAMHS or another organisation, it is recommended that an Individual Care Plan should be drawn up. The development of the plan should involve the pupil, parents, 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

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 PSHEe curriculum.

We will follow the guidance issued by the 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 students' wellbeing through the development of healthy coping strategies and an understanding of students' own emotions as well as those of other people.

Additionally, we use Zippy's Friends, Apple's Friends and Passport. A school based social emotional learning programme. The programme teaches children how to choose positive coping strategies to deal with everyday difficulties. They learn that they can choose good solutions based on two simple rules:

The solution must

- help me to feel better
- not hurt me or anyone else
- If a strategy obeys these two rules, it's ok.

The programmes are based on research which shows that even young children of five or six can learn positive coping strategies. The more strategies they can develop, the better able they will be to cope.

There will be Mental Health Awareness days and weekly assemblies relating to Mental Health and well-being.

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

8.0 Sources or support at school and in the local community

Each pupil and their well-being is unique and is approached in this way depending on the situation.

In some circumstances just talking and listening is required.

Others may benefit from a more structured programme.

Our Mental health and wellbeing lead is available at all times for pupils/ staff and parents.

Some of the more structured programmes used:

Feelings Artbook / Mindfulness activities- colouring

All About Me Booklet (Emotionally Healthy Schools)

What to do when you worry too much

What to do when your temper flares

Grief Encounter Workbook

Circle Time / Time to Talk / Talkabout

Starving the Stress Gremlin

Live Well: a directory of support and advice where you'll find useful information and advice on a range of subjects, and an easy to use directory of services & activities in Cheshire East.

<http://www.cheshireeast.gov.uk/livewell/livewell.aspx>

My Mind: is an NHS website, run by CWP CAMHS. This site has been developed for everyone interested in the mental health and well-being of young people. www.mymind.org.uk

Visyon: a charity supporting the emotional health of children, young people and their families.

www.visyon.org.uk

You in Mind: a directory of support for mental health issues, in the local area.

www.youinmind.org

Online Support

Young Minds: a charity committed to improving the wellbeing and mental health of children and young people. www.youngminds.org.uk

Kooth: an online counselling and emotional well-being platform for young people.

www.Kooth.com

NSPCC: is the UK's leading children's charity, preventing abuse and helping those affected to recover. www.nspcc.org.uk

Childline: get help and advice about a wide range of issues, call us on 0800 1111, talk to a counsellor online, send an email or post on the message boards. www.childline.org.uk

Samaritans: a safe place for you to talk any time you like, in your own way – about whatever's getting to you. You don't have to be suicidal. Whatever you're going through, call us free any time, from any phone on 116 123. www.samaritans.org

B-eat: a charity supporting anyone affected by eating disorders such as anorexia or bulimia. www.beat.co.uk

Charlie Waller Memorial Trust: a good source of information about anxiety and depression. www.cwmt.org.uk

This website provides CBT self help and therapy resources, including worksheets and information sheets and self help mp3s www.getselfhelp.co.uk

This website offers: Research, Resources and support as well as Interventions and a support, participation Blog. www.annafreud.org

Talking Therapies can help you with everyday issues that affect your mental wellbeing: money worries, relationship issues, social isolation, housing and employment. We can then offer the right support for you, which may include information and advice, groups, courses or one-to-one support to help improve your situation. www.mytalkingtherapies.com

South Cheshire CLASP aims to reach out and support those in the local community who are affected by the difficulties associated with parenting alone, whatever their circumstances. We offer friendly support and encouragement to assist with the progression from crisis to wholeness and a positive future for the whole family. www.southcheshireclasp.org.uk

MindEd for Families has advice and information from trusted experts and will help you to understand what problems occur, what you can do to best support your family, and how to take care of yourself. www.minded.org.uk

One You Cheshire East is part of a national health initiative supported by Cheshire East Council, along with Peaks & Plains Housing Trust. Together, we're committed to helping make it as easy as possible for local people to live better, healthier and longer. www.oneyoucheshireeast.org

Our vision is for all families to have the support they need to rebuild their lives, when a child grieves or when a child dies. Our mission is to ensure the accessibility of high quality child bereavement support and information to all families. We provide confidential support, information and guidance. www.childbereavement.org

Self-harm can be difficult to talk about but it's a common problem and you can beat it. Find out what self-harm means and what to do if you think you're affected by it.

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 L.Colman/C.Yarwood/J.Ashworth.

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 secretly
- 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 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 work closely with school nurses and their teams in supporting the emotional and mental health needs of school-aged children and are equipped to work at community, family and individual levels. Their skills cover identifying issues early, determining potential risks and providing early intervention to prevent issues escalating.

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
- Identifying and assessing in line with the Early Help Assessment Tool (EHAT)

Children who are showing early signs of anxiety, emotional distress, or behavioural problems;

- 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.

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 the student's personal file, including:

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

This information will be shared with (***L.Colman, C.Yarwood, J.Ashworth***)

All staff are aware that they use TED when talking to a pupil.

T-Tell me

E-Explain to me

D-Describe to me

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

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; in line with our safeguarding and child protection policy and where there is a risk of harm to the pupil themselves or others.

It is always advisable to share disclosures with a colleague, usually Designated Safeguarding Lead and mental health lead.

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 must always be informed if there is considered to be a risk to the young person or others, in line with usual safeguarding procedures. Pupils may choose to tell their parents themselves. 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 safeguarding or child protection issues, the Designated Safeguarding Lead must be informed immediately.

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
- Who should be present – 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/agreed are added to the pupil's record and an Individual Care Plan created if appropriate. Finish each meeting with agreed next steps and always keep a brief record of the meeting on the child's confidential record.

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 go 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
- 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

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 promoting social and emotional wellbeing and preventing mental health problems.
- Ensuring parents are aware of our full time Designated Mental Health Lead and how to contact them if necessary.
- Highlighting sources of information and support about common mental health issues through our communication channels (website, newsletters etc)
- 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.

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 to help them understand and cope with the difficult emotions they may be feeling. This will be provided one to one or group setting.

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.

We will host relevant information on our website 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.

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 students.

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.

J. Ashworth has received professional Mental Health First Aid training and is completing Advanced Mental Health Lead Course.

16.0 Policy Review

This policy will be reviewed every three years as a minimum. The next review date is **Feb 2025**

In between updates, the policy will be updated when necessary to reflect local and national changes. This is the responsibility of **(L.Colman/J.Ashworth)**.

Any personnel changes will be implemented immediately.

Appendix D: Example Record of Concerns Form

Name of Child:		Class /Form Tutor:	
Name of person completing this form:	Role:	Date of Concern:	Time of concern:
Nature of concern:	Emotional <input type="checkbox"/> Physical <input type="checkbox"/> Neglect <input type="checkbox"/> Sexual Abuse <input type="checkbox"/> Emotional Wellbeing <input type="checkbox"/> Self-harm		

Detail of concerns: <i>What you saw, what you heard, in the child's words. Include brief, accurate details and who else was present. Was it 1st or 2nd hand information? Distinguish between fact and opinion.</i>	
	<i>Continue on a separate piece of paper and attach as required</i>

For Completion by Designated Lead:

Date record received:	Time record received:	
Agreed actions with basis for decision	By whom	By when

Signature of Designated Lead:	Date of when actions are to be reviewed:
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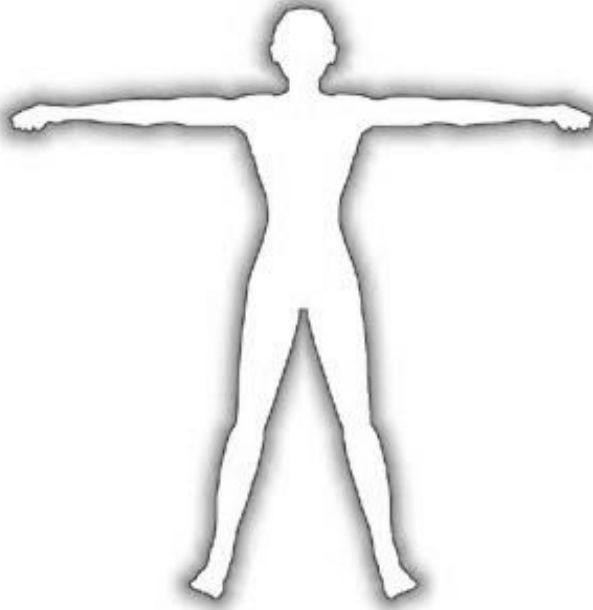
Agreed actions with basis for decision	By whom	By when

Signature of Designated Lead:	Date of when actions are to be reviewed:
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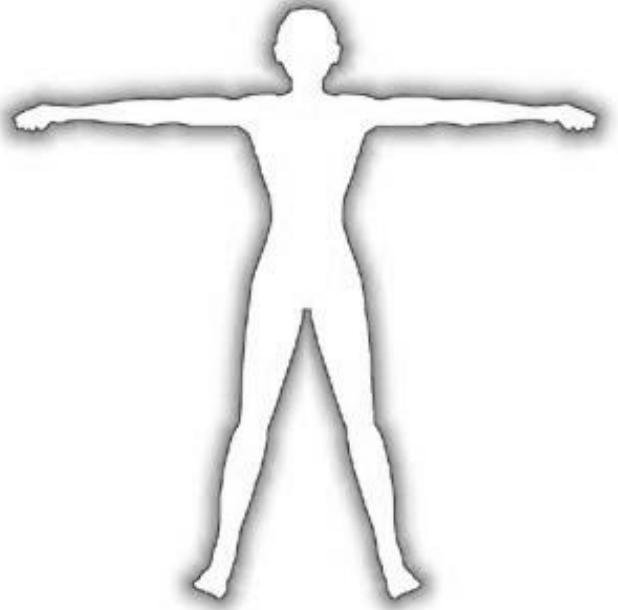
Remember when completing the body map to give an approx. sizes/dimensions of mark/injury

Sites of Injury

FRONT



BACK



Outcome of Concerns for Completion by Designated Lead:

Outcome of Concerns for Completion by Designated Lead:

Appendix E: **The Self-Harm Pathway**



Self Harm Pathway
CWP EHS 2017.pdf