

EMOTIONAL HEALTH AND WELL-BEING POLICY

Policy Approved: November 2023 Policy Renewal: November 2026

Reviewed by the LGB Governors

"The Governors of Greenbank High School are committed to safeguarding and promoting the welfare of children and young people at every opportunity and expect all staff and volunteers to share this commitment"

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1. 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)

At our school, we aim to promote positive mental health for every member of our staff and student body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches.

In addition to promoting positive mental health, we aim to recognise and respond to ill mental health. In an average classroom, five children will be suffering from a diagnosable mental health issue. (MQ Mental Health, Feb 2023) 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.

2. 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 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.

3. The Policy Aims to:

- · Promote positive mental health in all staff and students
- Increase understanding and awareness of common mental health issues
- 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 ill mental health and their peers and parent / carers

4. Lead Members of Staff

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

- Mrs A. Gent-Jones Designated Child Protection and Safeguarding Officer, Mental Health Lead, Pastoral Lead, LAC and Mental Health First Aider.
- Mrs T. Powsey Well-being Champion, Mental Health First Aider and qualified counsellor.
- Mrs A. Fitzgerald Mental Health First Aider, Learning Mentor, Deputy DSL.
- Mrs. H. Howe SENCO, Deputy DSL
- Mrs E. Stansfield Lead Learning Mentor and Member of the Safeguarding Team.
- Mrs P. Caunce Young Carer Co-ordinator and Member of the Safeguarding Team.
- Mrs H. Howe SENDCO / Deputy Child Protection & Safeguarding Officer.
- Miss. H. Wilson Safeguarding team and Pupil Premium mentor.
- Mrs J Alston Safeguarding team and Learning Mentor
- Mrs S Whittaker CPD lead.
- Mrs H Clarke Associate Assistant Head Teacher Personal Development.

Any member of staff who is concerned about the mental health or wellbeing of a student should speak to the mental health lead or a member of the safeguarding team 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 team or the head teacher. 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.

Where a referral to CAMHS or counsellor is appropriate, this will be led and managed by a member of the safeguarding team. Guidance about referring to CAMHS

5. Individual Care Plans

It is helpful to draw up an individual care / support plans for pupils causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the pupil, the parent / carers and relevant health professionals. This is especially required following a safety plan being conducted by CAMHS. 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

6. Teaching about Mental Health

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 PD 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 <u>PSHE Guidance on Health and Well-being</u> to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

7. Signposting

We will ensure that staff, students and parent / carers 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 can be found on the school's website.

We will display relevant sources of support in communal areas such as notice boards, form rooms and toilets and will regularly highlight sources of support to students within relevant parts of the curriculum. Whenever

we highlight sources of support, we will increase the chance of student help-seeking by ensuring students understand:

- What help is available
- · Who it is aimed at
- How to access it
- Why to access it
- What is likely to happen next

8. Warning Signs

School staff may become aware of warning signs which indicate a student is experiencing ill mental health or struggling with their emotional wellbeing. These warning signs should **always** be taken seriously and staff observing any of these warning signs should communicate their concerns with a member of the safeguarding team.

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, family bereavement
- 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.

9. Managing disclosures

A student may choose to disclose concerns about themselves or a friend to any member of staff, therefore 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?' For more information about how to handle mental health disclosures sensitively, speak to a member of the safeguarding team.

All disclosures should be recorded in writing and held on the student's cpoms record. 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 mental health lead, Adele Gent-Jones, or a member of the safeguarding team who will store the record appropriately and offer support and advice about next steps. Professional support for which individuals could be signposted include: School mentoring, Kooth, school counselling, Venus, Parenting 2000, MHST, CAMHS and other specialist support services. As the demand on external emotional support agencies can be high, the school will try and facilitate referrals where possible.

10. Confidentiality

We should be honest with regard to the issue of confidentiality. We should always, where possible, pass on our concerns about a student to the relevant staff and family members. With the student, we should discuss:

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

We will aim never to share information about a student 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 the safeguarding team and / or a parent / carer. An example of this would be a young person who is in danger of harm.

To protect the emotional well-being of staff dealing with sensitive issues, always share disclosures within the safeguarding team, as we are no longer solely responsible for the student. This protects our well-being, as 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 would be most appropriate and helpful to share this information with.

If a child gives us reason to believe that there may be underlying child protection issues, parent / carers should not be informed, but the child protection team must be informed immediately. The child protection team would make the appropriate decision of whether to inform parent / carers, depending upon the level of risk to the child being escalated.

11. Working with Parent / Carers

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

It can be shocking and upsetting for parent / carers 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 / carers 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 parent / carers can also be helpful too e.g. parent / carer 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 parent / carers 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.

12. Working with All Parent / Carers

Parent / carers are often very welcoming of support and information from the school about supporting their children's emotional and mental health. In order to support parent / carers we will:

 Highlight sources of information and support about common mental health issues on our school website

- Ensure that all parent / carers 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 Emotional Health and Well-Being Policy easily accessible to parent / carers
- Share ideas about how parent / carers can support positive mental health in their children through our regular information evenings. Keep parent / carers informed about the mental health topics their children are learning about in Personal Development and share ideas for extending and exploring this learning at home.

13. Supporting Peers

When a student is suffering from ill mental health, 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. 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 parent / carers with whom we will discuss:

- What 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 needs 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

Our school will provide in-house training to be led by our Well-being Champion Tina Powsey on peer support. Our Mental Health Ambassador programme identifies young people who have opted to have a leadership role to support their peers in low level mental health interventions. Pupils are well-trained in safeguarding and providing appropriate signposting. Additionally, they know when to refer to an adult, should the case present as complex. These Ambassadors can be found in all year groups and annual training is to take place.

14. Training

As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular safeguarding training, to enable them to keep students safe.

We will post relevant information on our website and Sharepoint 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. 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.

Suggestions for individual, group or whole school CPD should be discussed with Siobhan Whitaker, our CPD Coordinator who can also highlight sources of relevant training and support for individuals as needed. Our strong link with Educational Psychologist Jenny Cosgrove can help facilitate whole staff inset. This can be supported with whole school bespoke training from the MHST on targeted areas of support; this should be discussed in terms of demand with the pastoral team.

The <u>Charlie Waller Memorial Trust</u> provided funded training to schools on a variety of topics related to mental health including twilight, half day and full day INSET sessions. For further information email <u>admin@cwmt.org</u> or call 01635 869754.

15. Policy Review

This policy will be reviewed every 3 years as a minimum. It is next due for review in November 2026. 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 Adele Gent-Jones. This policy will always be immediately updated to reflect personnel changes.

Appendix 1 – Support for children in school

Peer support

- Mental Health Ambassadors, all years' lunchtime drop-in at The Listening Lounge
- ANGELS A New Girls Easy Listening Service, year 10 pupils attached to year 7 forms to aid transition to high school
- Anti Bullying ambassadors
- Diversity group meet to provide a support network all pupils regardless of race, religion, gender, sexuality, disability and age etc
- Young Carers club meet weekly to support those pupils who have caring responsibilities
- Friendship club meet weekly to develop positive friendships
- SEND support room 6 access as a safe space for those pupils with additional needs
- Mentors in Violence Prevention year 9 pupils offering lessons to year 7 targeted content
- School Council form representatives who offer a voice in school council meetings
- Pupil Leadership Team representative elected body of year 11 pupils who meet with the Head Teacher weekly to provide a student perspective on school issues

Adult school support

- Form tutor
- Head of year
- Education through personal development programme
- Learning mentor support drop in and referral service
- Young carers support through young carers coordinator
- Safe Space Friday lunchtime support group
- Behaviour lead intervention
- SEND support counselling
- Team around the child school-based initiative which involves all adults associated with that child
- Referral and drop-in to school nurse Sara Gill
- Health surveys and follow-up support (Yr9)
- Safer Schools Police Officer PC Andy Ritchie
- School-based programmes coordinated through school, including Everton in the Community, LFC Foundation, Active Sefton, Southport & Area Schools' Worker Trust
- Mental health support team mentoring (referral only / low level CAMHS intervention through school)
- Mental health support team group work (whole school initiatives directed by senior mental lead)
- Referral to SEND counsellor (targeted SEND pupils)
- Referral to school counselling (private counselling operating through school)
- Specialist neurodiverse counsellor (private counsellor operating in school but referral from SEND department only HH)
- Reduced timetables, adapted curriculums and alternative provisions

Additional external support

- Kooth app provided to Sefton schools to support children
- CAMHS referrals

 Signposting to Venus (Women's aid), SWACA (Domestic abuse), RASA (Sexual (substance misuse) 	abuse), CGL
 Referrals to Complementary Education (Pupils have to access CAMHS, have CAMH must be unable to attend school) 	IS support and
 Virtual school support (Cared for children and those on social care plans) 	
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