

# Sandwell Community School

## Mental Health & Wellbeing Policy

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2024

Daniel Westwood  
Assistant Headteacher  
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Date: 01 March 2024

\_\_\_\_\_ Headteacher

Date: \_\_\_\_\_

\_\_\_\_\_ Chair of governors

Date: \_\_\_\_\_

## **MENTAL HEALTH AND WELLBEING POLICY**

*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 Organisation)*

### **1 BACKGROUND:**

As a result of the ongoing impact of the Coronavirus pandemic, the mental health of our students, staff and families has been at the core of our decision-making as a school, and this policy aims to embed this commitment to promoting and monitoring wellbeing within our culture. It also aims to set out a clear approach to supporting students and staff during times when their emotional wellbeing is less than optimal.

### **2 POLICY STATEMENT**

We are committed to championing the wellbeing and the mental health of our students, staff and the community of families we serve. When our emotional wellbeing is valued, when we feel connected and secure in respectful and nurturing relationships, and when we feel safe to express any worries and concerns we may have, we are most likely to thrive. Our students are more likely to enjoy the learning experience and secure better educational outcomes, our staff are more likely to enjoy their work and be more productive, and our community of families are more likely to enjoy a supportive environment for their children to be nurtured within. When our wellbeing is optimal, we can manage emotions, self-regulate behaviour, follow structures and routines, socially interact with peers, build trust with peers and adults and ultimately establish positive relationships (Carpenter, Barry and Carpenter, Matthew. April 2020).

We as a school aim to promote protective behaviours to safeguard the wellbeing of all. We believe that all members of the community have the right to feel safe and for our wellbeing to be prioritised, and that nothing is too small or insignificant to talk about with a trusted adult in our school support network.

### **3 SCOPE**

This document describes the school's approach to promoting positive mental health and wellbeing. The policy is intended as guidance for all staff, including non-teaching staff and governors.

The school policy sets out the following requirements:

- a. promote pupil mental health
- b. support mental ill health
- c. make statements of policy in relation to promotion, prevention and support for mental ill health
- d. promote training and information for school staff on the subject of mental health
- e. have regard to pupil mental health in joint working arrangements with
  - i. other governing bodies
  - ii. local authorities
  - iii. commissioners and providers of the National Health Service

## **4 STAFF ROLES AND RESPONSIBILITIES**

As a school community, all staff have a responsibility to promote positive mental health, and to understand about the protective and risk factors for mental health. All staff will receive regular training in child mental health so that they can recognise and respond to mental health issues and we aim to use a common framework to encourage everyone within the community to recognise poor mental health early warning signs within themselves as well as others, and a common strategy to connect and seek support whenever these signs arise. This will form part of the staff's regular safeguarding training and requirement to keep children safe. The school will also provide additional training opportunities for staff and we will support additional CPD throughout the year where it becomes appropriate due to developing situations with students as they arise.

Any member of staff who is concerned about the wellbeing or mental health of a student should speak to a member of the Safeguarding team in the first instance. If there is a fear that the child is in danger of immediate harm then the normal safeguarding and child protection procedures should be followed with an immediate referral to the Designated Safeguarding Lead. If the student presents a medical emergency then the normal procedures for medical emergencies should be followed, including alerting first aid staff and contacting emergency services if required.

Certain staff members have a specific role in the process. These are listed below:

- Chanelle Nixon – Designated Safeguarding Lead whole School
- Natasha Taylor – Deputy Designated Safeguarding Lead Whole School
- Sarah Colclough - Deputy Designated Safeguarding Lead Whole School
- Sarah Clarkson – Designated Safeguarding Lead Wednesbury
- Jackie James – Designated Safeguarding Lead Tividale

## **5 INDIVIDUAL CARE PLANS**

It is helpful to draw up an individual care plan for students causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn-up involving the students, the parents/carers and relevant health professionals. 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

## **6 PROMOTING POSITIVE MENTAL HEALTH**

The school will:

- Work to help students to understand their emotions and experiences better
- Ensure our students feel comfortable sharing any concerns and worries
- Help students to form and maintain relationships
- Encourage students to be confident and help to promote their self-esteem

- Help students to develop resilience and ways of coping with setbacks

The school will promote a healthy environment by:

- Promoting positive mental health and emotional wellbeing in all students and staff
- Celebrating both academic and non-academic achievements
- Promoting our school's CREATE values (Cooperation, Respect, Effort, Attendance, Tolerance, Excellence) and encouraging a sense of belonging and community
- Providing opportunities to develop a sense of worth and to reflect
- Promoting our students' voices and giving them the opportunity to participate in decision-making
- Adopting a whole-school approach to mental health and providing support to any student who needs additional help through interventions or referrals to external interventions.
- Educating pupils through PHSE throughout the year, including Personal Development sessions and 'Wellbeing Wednesday' form time activities
- Raising awareness amongst staff and students about mental health issues and their signs and symptoms
- Enabling staff to respond to early warning signs of mental-ill health in students
- Supporting staff who are struggling with their own mental health

## **7 SIGNPOSTING**

We will ensure that staff, students and parents/carers are aware of sources of support within school, in the local community and nationally. What support is available within our school, locally and nationally, who it is aimed at and how to access it is outlined in the Appendix.

We will display relevant sources of support in communal areas such as corridors, staff rooms and toilets and will regularly highlight sources of support to students within relevant parts of the curriculum, in assemblies and in form times. We will also ensure that our Wellbeing section of the website is regularly updated and is accessible to all.

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 EARLY WARNING SIGNS**

As part of the three weekly Personal Development lessons and 'Wellbeing Wednesday' activities, students reflect on the physical, social and behavioural early warning signs that indicate that it would be positive to seek support.

Staff may become aware of warning signs which indicate a student is experiencing mental ill-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 to a member of the Safeguarding team in the first instance.

Possible warning signs include:

- Physical signs of harm that are repeated or appear non-accidental
- Repeated physical pain or nausea with no evident cause
- Changes in eating or sleeping habits

- Changes in activity and mood
- Increased isolation from friends or family, becoming socially withdrawn
- 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
- An increase in lateness or absenteeism
- Lowering of academic achievement

## 9 MANAGING DISCLOSURES AND CONFIDENTIALITY

It is important that staff remain calm, supportive and non-judgemental to students who disclose a concern about themselves or another student. We should be honest with regard to the issue of confidentiality and if it is necessary for us to pass our concerns about a student on, staff should be clear with students that their concern will be shared with the relevant staff member. 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?'.

All disclosures should be recorded on My Concern, and if there is a fear for the immediate safety or wellbeing of the young person, an immediate referral should be made to the Designated Safeguarding Lead.

Parents/carers must always be informed if;

- A child has self-injured or disclosed that they have considered self-injuring
  - A child suggests or expresses they are having suicidal thoughts or have attempted suicide
  - A child discloses disordered eating behaviours
- If a child gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but a Designated Safeguarding Lead must be informed immediately.

## 10 WORKING WITH PARENTS/CARERS

The school will support parents/carers as much as possible. This means keeping them informed about their child and offering our support at all times. Where it is deemed appropriate to inform parents, we need to be sensitive in our approach.

To support parents/carers we will:

- Highlight sources of information and support about mental health and emotional wellbeing that we have in our school
- Share and allow parents/carers to access further support
- Ensure that parents/carers are aware of who to talk to if they have any concerns about their child
- Give parents/carers guidance about how they can support their child's/children's positive mental health
- Ensure this policy is easily accessible to parents/carers on the school website

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/carers often have many questions as they process the information. Finish each meeting with agreed next steps and always keep a brief record of the meeting on MyConcern.

## **11 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. Support will be provided to individuals, or groups on a case-by-case basis. Where a member of staff has concerns about any child, these should be reported to the safeguarding team in line with the safeguarding policy.

## **12 Alternative Provision Specialist Taskforce Project**

The Alternative Provision Specialist Taskforces Project is a new pilot funded by the Department for Education (DfE). The school has been selected to be a part of the pilot and the taskforce will work directly with young people in school to offer intensive support from experts, including mental health professionals, family workers, and speech and language therapists. This two-year programme aims to support students to remain engaged in education; reduce truancy, NEET rates, involvement in serious violence and improving mental health and well-being.

Objectives of the taskforce are:

- To support the complex needs of pupils in alternative provision settings by providing specialist support on site.
- To bring together local partners drawn from across health, education, social care, youth services and youth justice to create the specialist taskforce in the AP school.
- To rigorously test the quality of implementation and impact on pupil outcomes such as truancy, NEET rates, behaviour and mental health and wellbeing over the 2 years of the pilot and beyond.

‘Indicators of needs and risks’ to help describe the circumstances in which the taskforce intervention is appropriate or if an Early Help Assessment (EHA) should be considered and when a referral to Children’s Social Care may be necessary alongside a range of universal service, is outlined in the Appendix.

## Appendix A: Further Information about common mental health issues

Below, we have sign-posted information and guidance about the issues most commonly seen in school-aged children. The links will take you through to the most relevant page of the listed website. Some pages are aimed primarily at parents/carers but they are listed here because we think they are useful for school staff too. Support on all these issues can be accessed via Young Minds ([www.youngminds.org.uk](http://www.youngminds.org.uk)), Mind ([www.mind.org.uk](http://www.mind.org.uk)) and (for e-learning opportunities) Minded ([www.minded.org.uk](http://www.minded.org.uk)).

### **Self-harm**

Self-harm describes any behaviour where a young person causes harm to themselves in order to cope with thoughts, feelings or experiences they are not able to manage in any other way. It most frequently takes the form of cutting, burning or non-lethal overdoses in adolescents, while younger children and young people with special needs are more likely to pick or scratch at wounds, pull out their hair or bang or bruise themselves.

#### **Online support**

- SelfHarm: [www.selfharm.co.uk](http://www.selfharm.co.uk)
- National Self-Harm Network: [www.nshn.co.uk](http://www.nshn.co.uk)

#### **Books**

- Pooky Knightsmith (2015) *Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies*. London: Jessica Kingsley Publishers
- Keith Hawton and Karen Rodham (2006) *By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents*. London: Jessica Kingsley Publishers
- Carol Fitzpatrick (2012) *A Short Introduction to Understanding and Supporting Children and Young People Who Self-Harm*. London: Jessica Kingsley Publishers

### **Depression**

Ups and downs are a normal part of life for all of us, but for someone who is suffering from depression these ups and downs may be more extreme. Feelings of failure, hopelessness, numbness or sadness may invade their day-to-day life over an extended period of weeks or months, and have a significant impact on their behaviour and ability and motivation to engage in day-to-day activities.

#### **Online support**

- Depression Alliance: [www.depressionalliance.org/information/what-depression](http://www.depressionalliance.org/information/what-depression)

#### **Books**

- Christopher Dowrick and Susan Martin (2015) *Can I Tell you about Depression?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers

### **Anxiety, panic attacks and phobias**

Anxiety can take many forms in young people, and it is something that each of us experiences at low levels as part of normal life. When thoughts of anxiety, fear or panic are repeatedly present over several weeks or months and/or they are beginning to impact on a young person's ability to access or enjoy day-to-day life, intervention is needed.

#### **Online support**

- Anxiety UK: [www.anxietyuk.org.uk](http://www.anxietyuk.org.uk)

#### **Books**

- Lucy Willetts and Polly Waite (2014) *Can I Tell you about Anxiety?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers

- Carol Fitzpatrick (2015) *A Short Introduction to Helping Young People Manage Anxiety*. London: Jessica Kingsley Publishers

## **Obsessions and compulsions**

Obsessions describe intrusive thoughts or feelings that enter our minds which are disturbing or upsetting; compulsions are the behaviours we carry out in order to manage those thoughts or feelings. For example, a young person may be constantly worried that their house will burn down if they don't turn off all switches before leaving the house. They may respond to these thoughts by repeatedly checking switches, perhaps returning home several times to do so. Obsessive compulsive disorder (OCD) can take many forms – it is not just about cleaning and checking.

### **Online support**

- OCD UK: [www.ocduk.org/ocd](http://www.ocduk.org/ocd)

### **Books**

- Susan Conners (2011) *The Tourette Syndrome & OCD Checklist: A practical reference for parents and teachers*. San Francisco: Jossey-Bass
- Amita Jassi and Sarah Hull (2013) *Can I Tell you about OCD?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers

## **Suicidal feelings**

Young people may experience complicated thoughts and feelings about wanting to end their own lives. Some young people never act on these feelings though they may openly discuss and explore them, while other young people die suddenly from suicide apparently out of the blue.

### **Online support**

- Prevention of young suicide UK – PAPYRUS: [www.papyrus-uk.org](http://www.papyrus-uk.org)
- On the edge: ChildLine spotlight report on suicide: [www.nspcc.org.uk/preventing-abuse/research-and-resources/on-the-edge-childline-spotlight/](http://www.nspcc.org.uk/preventing-abuse/research-and-resources/on-the-edge-childline-spotlight/)

### **Books**

- Keith Hawton and Karen Rodham (2006) *By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents*. London: Jessica Kingsley Publishers
- Terri A.Erbacher, Jonathan B. Singer and Scott Poland (2015) *Suicide in Schools: A Practitioner's Guide to Multi-level Prevention, Assessment, Intervention, and Postvention*. New York: Routledge

## **Eating problems**

Food, weight and shape may be used as a way of coping with, or communicating about, difficult thoughts, feelings and behaviours that a young person experiences day to day. Some young people develop eating disorders such as anorexia (where food intake is restricted), binge eating disorder and bulimia nervosa (a cycle of bingeing and purging). Other young people, particularly those of primary or preschool age, may develop problematic behaviours around food including refusing to eat in certain situations or with certain people. This can be a way of communicating messages the child does not have the words to convey.

### **Online support**

- Beat – the eating disorders charity: [www.b-eat.co.uk/about-eating-disorders](http://www.b-eat.co.uk/about-eating-disorders)
- Eating Difficulties in Younger Children and when to worry: [www.inourhands.com/eating-difficulties-in-younger-children](http://www.inourhands.com/eating-difficulties-in-younger-children)

### **Books**

- Bryan Lask and Lucy Watson (2014) *Can I tell you about Eating Disorders?: A Guide for Friends, Family and Professionals*. London: Jessica Kingsley Publishers
- Pooky Knightsmith (2015) *Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies*. London: Jessica Kingsley Publishers



- Pooky Knightsmith (2012) *Eating Disorders Pocketbook*. Teachers' Pocketbooks

## Appendix B: Guidance and advice documents

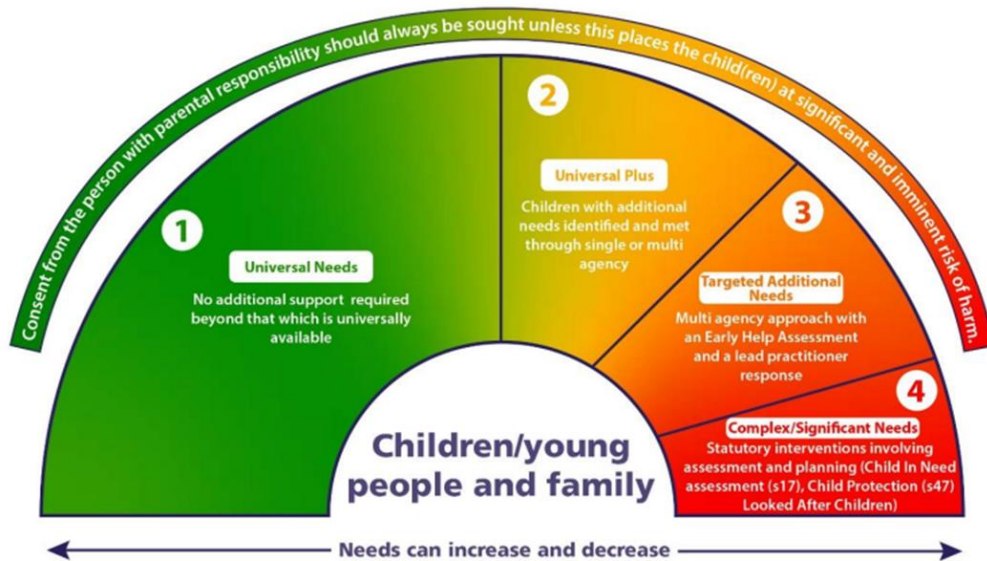
- Mental health and behaviour in schools - departmental advice for school staff. Department for Education (2014)
- Counselling in schools: a blueprint for the future - departmental advice for school staff and counsellors. Department for Education (2015)
- Teacher Guidance: Preparing to teach about mental health and emotional wellbeing (2015). PSHE Association. Funded by the Department for Education (2015)
- Keeping children safe in education - statutory guidance for schools and colleges. Department for Education (2014)
- Supporting pupils at school with medical conditions - statutory guidance for governing bodies of maintained schools and proprietors of academies in England. Department for Education (2014)
- Healthy child programme from 5 to 19 years old is a recommended framework of universal and progressive services for children and young people to promote optimal health and wellbeing. Department of Health (2009)
- Future in mind – promoting, protecting and improving our children and young people’s mental health and wellbeing - a report produced by the Children and Young People’s Mental Health and Wellbeing Taskforce to examine how to improve mental health services for children and young people. Department of Health (2015)
- NICE guidance on social and emotional wellbeing in primary education
- NICE guidance on social and emotional wellbeing in secondary education
- What works in promoting social and emotional wellbeing and responding to mental health problems in schools? Advice for schools and framework document written by Professor Katherine Weare. National Children’s Bureau (2015)

# Appendix C: Alternative Provision Specialist Taskforce Project

The AP Taskforce provides four levels of intervention:

- **Universal**
- **Universal Plus**
- **Targeted Additional Needs**
- **Complex/Significant Needs**

The windscreen model below outlines the 'indicators of needs and risks' to help describe the circumstances in which Taskforce Intervention is appropriate or if an Early Help Assessment (EHA) should be considered and when a referral to Children's Social Care may be necessary alongside a range of universal services.



## Appendix D: Support Services

Below is a list of national and local support services or charities that might be accessed by students or their families. Often there is a range of charities and other local services that can be accessed freely or at very low cost. There may be pockets of knowledge on such topics amongst staff and parents. It is well worth going to the effort of trying to gather this information in your policy so that it is easy to access centrally when most needed.

### National Services for Advice and General Support

- NHS helpline - call 111 or visit [www.nhs.uk](http://www.nhs.uk)
- Samaritans - call 116 123 or visit [www.samaritans.org](http://www.samaritans.org)
- YOUNG MINDS for better mental health - call 0808 802 5544 or visit [www.youngminds.org.uk](http://www.youngminds.org.uk)
- [Anna Freud National Centre for Children and Families](#) – Providing a range of specialist types of support for children, young people and families
- Place2Be – children and young people’s mental health charity – visit [www.place2be.org.uk](http://www.place2be.org.uk)

### National Support Services for Young People

- The MIX for under 25s – call 0808 808 4994 or visit [Get Support - The Mix](#)
- SHOUT – the UK’s 24/7 crisis text service for young people for mental health – text SHOUT 85258 or visit [giveusashout.org](http://giveusashout.org)
- KOOOTH – online mental health community for young people - [Home - Kooth](#)
- Childline – call on 0800 1111 or visit [www.childline.org.uk](http://www.childline.org.uk)
- NSPCC – the UK’s leading charity, preventing abuse and helping those affected recover – visit [www.nspcc.org.uk](http://www.nspcc.org.uk)

### Local Services - Birmingham

- Birmingham child and adolescent mental health services - call 0300 300 0099 or visit [Home | Forward Thinking Birmingham](#)
- The Waiting Room (Birmingham and Solihull Health and Wellbeing Services) – visit [the-waitingroom.org/](http://the-waitingroom.org/)
- Reflections – Black Country Healthcare NHS Trust – call 0121 612 6620
- Decca – Sandwell’s young people's alcohol, drug and tobacco service – call 0121 569 2201 or visit [decca\\_team@sandwellchildrenstrust.org](mailto:decca_team@sandwellchildrenstrust.org)
- Brook – Sandwell’s young people’s relationships, sex education and wellbeing support service – call 07733 264278 or visit [www.brook.org.uk/](http://www.brook.org.uk/)
- Sandwell Prevent - Prevent is the safeguarding part of the National Counter Terrorism Strategy and aims to stop vulnerable people being drawn into or supporting terrorism – call 0121 569 3100 or visit [www.sandwell.gov.uk/prevent](http://www.sandwell.gov.uk/prevent)

