Kingsfield Primary School

A member of the Active Learning Trust

Statement / Policy Summary	
This policy looks at the school's approach to supporting children's mental health within school.	
Date ratified:	Spring 2022
Date of review:	Spring 2024

Equalities Impact Statement	
Has this policy fully considered the school's equality objectives and statement?	Yes
Is there any impact upon the school's equality objectives?	Yes
If 'yes', are these clearly described and their impact assessed?	Positive impact upon inclusion

1.0 Why mental health and wellbeing is important

1.1 At Kingsfield Primary 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. In 2017, about 1 in 10 children aged 5 to 16 had a diagnosable mental health need and these can have an enormous impact on quality of life, relationships and academic achievement. In many cases it is life-limiting.

1.2 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.

1.3 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.

1.4 Our aim is to help develop the protective factors which build resilience to mental health problems and to be a school where:

- All children are valued and respected
- Children have a sense of belonging and feel safe
- Children feel able to talk openly with trusted adults about their problems without feeling any stigma
- Positive mental health is promoted and valued
- Bullying is not tolerated

2.0 The purpose of the policy

2.1 This policy sets out:

- How we promote positive mental health
- How we prevent mental health problems
- How we identify and support children with mental health needs.
- How we train and support all staff to understand mental health issues and spot early warning signs to help prevent or address mental health problems
- Key information about some common mental health problems
- Where parents, staff and children can get further advice and support

3.0 Definition of mental health and wellbeing

3.1 We use the World Health Organisation's definition of mental health and wellbeing *"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".*

3.2 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.

4.0 Links to other policies

4.1 This policy links to our policies on Safeguarding, Anti-bullying, SEND and PSHE. 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.

5.0 A whole school approach to promoting positive mental health

5.1 We take a whole school approach to promoting positive mental health that aims to help children become more resilient, happy and successful and to prevent problems before they arise.

This encompasses the following aspects:

- Creating an ethos, policies and behaviours that support mental health and resilince, and which everyone understands.
- Helping children to develop social relationships, support each other and seek help when they need it.
- Helping children to be resilient learners.
- Teaching children social and emotional skills and an awareness of mental health.
- Early identification of children who have mental health needs and planning support to meet their needs, including working with specialist services.
- Effectively working with parents and carers.
- Supporting and training staff to develop their skills and their own resilience.

5.2 We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues. We therefore aim to create an open and positive culture that encourages discussion and understanding of these issues.

6.0 Staff roles and responsibilties, including those with specific responsiblities

6.1 We believe that all staff have a responsibility to promote positive mental health and need 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 early warning signs of mental health problems and ensure that children with mental health needs get early intervention and the support they need.

6.2 All staff understand about 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 childrne from adversity, such as self-esteem, communication and problem-solving skills, a sense of

worth and belonging and emotional literacy (see appendix 1 on risk and protective factors).

6.3 Within the school the Social, Emotional, Mental Health (SEMH) lead and Inclusion Lead work closely with the mental health champions to ensure mental health is a school priority.

SEMH and ELSA Practitioners:

- Deliver high quality interventions to support children who are struggling with their mental health.

Mental Health Leads

- Leads and works with other staff to coordinate whole school activities to promote positive mental health and wellbeing.
- Provides advice and support to staff and organises training and updates.
- Leads on PSHE teaching about mental health.
- Trained Mental Health Champions.

SEMH Lead

- Is the first point of contact with mental health services, and makes individual refferals to them.

Inclusion Lead

- Works alongside the SEMH Lead to ensure appropriate provision and services are accesed.

6.4 We recognise that many behaviours and emotional problems can be supported within the School environment, or with advice from externaal professionals. Some children will need more intensive support at times, and there are a range of mental health professionals and organisations that provide support to children with mental health needs and their families.

7.0 Supporting children's positive mental health

7.1 We believe our school has a key role in promoting children's positive mental health and helping to prevent mental health problems. Our school has developed a range of strategies and approaches including:

- Campaigns and assemblies to raise awareness of mental health including the work of YoungMinds and Children's Mental Health week.
- Weekly class-based wellbeing assemblies.
- Bespoke packages of support for identified individuals.
- Transitions are carefully planned for to ensure they support children's mental health, especially the transition between Year 6 and Secondary.
- Circle time within class as needed.
- Displays and information around the school about positive mental health and where to go for help and support.
- Nurture groups and access to ELSA support.
- Resilience frameworks completed for each class to support individual needs.

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

8.0 Identifying, referring and supporting children with mental health needs

8.1 Our approach:

- Provide a safe environment to enable children to express themselves and be listened to
- Ensure the welfare and safety of children are paramount
- Identify appropriate support for children based on their needs using THRIVE
- Involve parents and carers when their child needs support
- Involve children in the care and support they have
- Monitor, review and evaluate the support with children and keep parents and carers updated.

9.0   Early identification

9.1   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:

- Analysing behaviour, exclusions, medical record and attendance.
- Using Boxall profiling termly to identify children who may need support.
- Staff to report concerns about individual children to the relevant leads.
- Pupil progress meetings half termly.
- Regular meetings for staff to raise concerns.
- Gathering information from previous school at transfer.
- Parents' evenings.
- Enabling children to raise concerns to any member of staff.
- Enabling parents and carers to raise concerns to any member of staff.

9.2   All staff at Kingsfield Primary School have read the protective and risk factors (Appendix 1), types of mental health needs (Appendix 2) and signs that might mean a pupil is experiencing mental health problems. Any member of staff concerned about a pupil will take this seriously and talk to the Mental Health Lead, Inclusion Lead or Safeguarding leads.

9.3   These signs might include:

- Isolation from friends and family and becoming socially withdrawn.
- Changes in activity or mood or eating/sleeping habits.
- Failing academic achievement.
- Talking or joking about self-harm or suicide.
- Expressing feelings of failure, uselessness or loss of hope.
- Secretive behaviour.
- An increase in lateness or absenteeism.
- Not wanting to do PE or get changed for PE.
- Wearing long sleeves in hot weather.
- Drugs or alcohol misuse.
- Phyiscal signs of harm that are repeated or appear non-accidental.
- Repeated phyiscal pain or nausea with no evident cause.

10.4   Staff are aware that mental 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.

10.5   If there is a concern that a pupil 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.

10.0   Disclosures and confidentiality

11.1 We recognise how important it is that staff are calm, supportive and non-judgemental to children who disclose a concern about themselves or a friend. The emotional and physical safety of our children is paramount and staff listen rather than advise. Staff make it clear to children that the concern will be shared with the Inclusion Lead or Safeguarding Lead and recorded, in order to provide appropriate support to the pupil. All disclosures are recorded on myconcern.

11.0 Involving parents and carers

11.1 **Promoting mental health** - We recognise the important role parents and carers have in promoting and supporting the mental health and wellbeing of their children, and in particular supporting children who do have mental health needs.

11.2 *To support parents and carers:*

- We provide information and websites on mental health issues and local wellbeing and parenting programmes, which can be accessed on the school website. The information includes who parents can talk to if they have concerns about their own child or a friend of their child and where parents can access support for themselves.
- The PSHE curriculum is shared with parents on the school website which includes mental health topics.

11.3 **Supporting parents and carers with children with mental health needs** - We are aware that parents and carers react in different ways to knowing their child has a mental health problem and we will be sensitive and supportive. We also aim to reassure by explaining that mental health problems are common, that the school has experience of working with similar issues and that help and advice are available.

11.4 When a concern has been raised, the school will:

- Contact parents and carers and meet with them.
- Offer information to take away and places to seek further information.
- Be available for follow up calls.
- Make a record of the meeting.
- Agree a mental health Individual Care Plan including clear next steps.
- Discuss how the parents and carers can support their child.
- Keep parents and carers up to date and fully informed of decisions about the support and interventions provided.

11.5 Parents and carers will always be informed if their child is at risk of danger and children may choose to tell their parents and carers themselves. We give children the option of informing their parents and carers about their mental health needs for themselves or of accompanying and supporting them to do so.

11.6 We make every effort to support parents and carers to access services where appropriate. Our primary concern is the children, and in the rare event that parents and carers are not accessing services we will seek advice from the Local Authority. We also provide information for parents and carers to access support for their own mental health needs.

12.0 Monitoring and review

12.1 This policy will be reviewed every two years.

Appendix 1

Protective and Risk factors (adapted from Mental Health and Behvaiour DfE March 2016)

	Risk factors	Protective factors
In the Child	• Genetic influences • Specific development delay • Communication difficulties • Physical illness • Academic failure • Low self-esteem • SEND	• Being female (in younger children) • Secure attachment experience • Outgoing temperament as an infant • Good communication skills, sociability • Being a planner and having a belief in control • Humour • Problem solving skills and a positive attitude • Experiences of success and achievement • Faith or spirituality • Capacity to reflect
In the Family	• Overt parental conflict including domestic violence • Family breakdown (including where children are taken into care or adopted) • Inconsistent or unclear discipline • Hostile and rejecting relationships • Failure to adapt to a child's changing needs • Physical, sexual, emotional abuse or neglect • Inconsistent or unclear discipline • Hostile and rejecting relationships • Parental psychiatric illness • Parental criminality, alcoholism or personality disorder • Death or loss- including loss of friendship	• At least one good parent-child relationship (or one supportive adult) • Affection • Clear, consistent discipline • Support for education • Supportive long term • relationship or the absence of severe discord
In the School	• Bullying • Discrimination • Breakdown in or lack of positive friendships • Negative peer influences • Peer pressure • Poor pupil to teacher relationships	• Clear policies on behaviour and bullying • 'Open door' policy for children to raise problems • A whole school approach to promoting good mental health • Positive classroom management • A sense of belonging • Positive peer influences
In the Community	• Socio-economic disadvantage • Homelessness • Disaster, accidents, war or other overwhelming events • Discrimination • Other significant life events	• Wider supportive network • Good housing • High standard of living • High morale school with positive policies for behaviour, attitudes and anti-bullying • Opportunities for valued social roles • Range of sport/leisure

Appendix 2

Specific mental health needs most commonly seen in school-aged children

For information see Annex C Main Types of Mental Health Needs

Mental Health and Behaviour in School DfE March 2016

https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2

Annex C includes definitions, signs and symptoms and suggested interventions for

- Anxiety (including panic attacks, phobias and Obsessive Compulsive Disorder OCD)
- Depression
- Eating Disorders
- Substance Misuse
- Self-Harm

Appendix 3
Where to get information and support

For support on specific mental health needs
Anxiety UK www.anxietyuk.org.uk
OCD UK www.ocduk.org
Depression Alliance www.depressionalliance.org
Eating Disorders www.b-eat.co.uk and www.inourhands.com
National Self- Harm Network www.nshn.co.uk and www.selfharm.co.uk
Suicidal thoughts www.papyrus-uk.org

For general information and support
www.youngminds.org.uk champions young people's mental health and wellbeing
www.mind.org.uk advice and support on mental health problems
www.minded.org.uk (e-learning)
www.time-to-change.org,uk tackles the stigma of mental health
www.rethink.org challenges attitudes towards mental health