Mental Health and Wellbeing Programme

Shenstone and Brades Lodge School

Intent: At Shenstone Lodge, we understand that resilience and wellbeing are integral to educational success. We believe that Mental Health is everyone's responsibility.



We cannot always change a child's circumstances but we can help to **Protect** them, help them to build trust so they can **Relate** with us and each other, and develop the skills to **Regulate** and **Reflect** on situations.

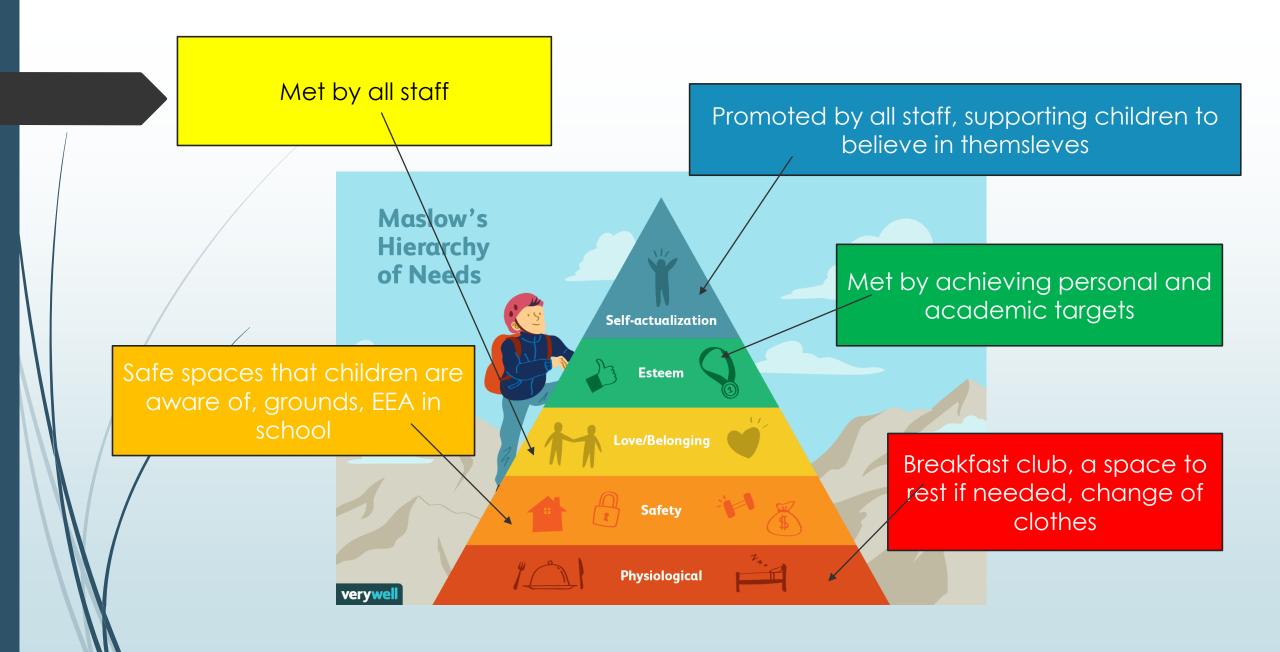
'We have a Duty'

- We are the primary developmental context after the family
- Children's learning and mental health are interrelated
- Interventions can influence outcomes
- We are the only support some children will ever access
- To listen without judgment, be curious and empathic
- Promote equality of opportunity
- Develop pupil's resilience, confidence, and knowledge to keep pupils mentally healthy
- Promote an inclusive environment

Mental health Support – Dee Hart Designated Mental Health Lead

- Brades
- Mental Health First Aiders
- Chris Husband
- Victoria Fitzgerald
- Safeguarding lead
- Allison Morling
- HIST
- TIS practitioner Curtis Foley-Bernard
- Nurture trained Staff Josie Marston and Louise Westwood
- Play Therapy Sarah Dawson

- Shenstone
- Mental Health First Aiders
- Dee Hart
- Leigh Bridgewater
- Ian Mitchell
- Stuart Hunt
- Safeguarding lead
- Leigh Bridgewater
- TIS practitioner Andrew Hart
- Nurture Trained staff Tom Albrigt, Sarah Sizer, Sally Jukes



Universal offer - all pupils receive this offer on enter to our school

- Proactive approaches,
- Positive reward system,
- Structure,
- Trauma-informed practice,
- Pupil profiles,
- Personalised plans,
- School environment,
- Differentiated learning opportunities,
- Multi-agency collaboration.
- Parental engagement.
- social skills,
- SLCN interventions

Targeted offer - discussion from class staff, behaviour watch data

- Wellbeing staff involvement if necessary,
- Sensory interventions and/or resources added to a class,
- Drawing and Talking,
- SLCN interventions targeted support from external services,
- Social play interventions,
- Emotional literacy,
- Personalised student contracts
- Appropriate external agencies
- Academic interventions to promote confidence and resilience

Complex Offer – discussed at SMT

- Individual risk management strategies,
- Potential fixed term exclusion to review how to best support needs,
- Multi-agency meeting,
- Early annual review (interim),
- Withdrawal 1:1 support,
- Reintegration timetable,
- Bespoke routines,
- Personalised learning (PRRR), thinking about locations, staffing etc.
- Specific external interventions counselling, mentoring etc

Implementation: Pathways to support for Mental Health and Wellbeing

0		0		<u>Step 3:</u>		0			
<u>Step 1:</u>		<u>Step 2:</u>		Specialist		<u>Step 4:</u>		<u>Step 5:</u>	
Initial Intervention Support at this		Primary care Support at this		Care Support at his level usually involves		Highly specialist care		High Intensity Care	
level is a low- level intervention, responding to pupils' stress and worries. This involves addressing the pupil's level of need, with a solution-focused approach.	C	level usually involves responding to a pupil's mental health needs such as anxiety, and poor sleep. Support can be sought from MHFA or Mental Health Lead.	C	responding to mental health needs that are affecting pupils' quality of life. This includes referrals to external services, BEAM, Brooke, counselling. Internal play therapy/interve ntions	C	Support at this level usually involves responding to complex or specific mental health needs. This includes referral to GP, CAMHs	C	Support at this level usually involves responding to pupils' who are believed to be at risk. This includes external support from the Crisis Team.	

Step	Description	pupil	Parent/carer	Staff involved	Review
1	Bespoke to the pupil, with a solution-focused approach. It could include calling parents/carers, reducing pressures/expec tations of or engaging in tasks. well being drop- in sessions	Focussing on their confidence -pupil to be able to say three things they are good at.	Parent/carer informed of support given to their child if necessary	All members of staff are trained, so whomever the pupil chooses as their trusted adult will be able to support them.	Staff to notify wellbeing SMT if concerns persist.

Step	Description	pupil	Parent/carer	Staff involved	Review
2	Pupils would be referred to this support(notificat ion). Review of intervention need, including drawing and talking, social stories, play therpay.	Is part of the planning process and understands how this targeted approach can help	Parent/carer informed of support given to their child	MHFA, Safeguarding lead, mental health, SENco, wellbeing teams.	If interventions in place review outcomes from data

Step	Description	pupil	Parent/carer	Staff involved	Review
3	Pupils signposted to external support. School Health Nurse as a referral/consultatio n route, liaison with social worker if a child is on a plan as well as use of the Early Help	Understands the need for more specialist support where increased resources can be accessed.	Parent/carer informed of support given to their child. Information provided about external services.	Mental Health lead in school checking in on how pupil is finding the external service –if the support received is appropriate. External Services School nurses Safeguarding leads	Carry out evaluation when support has commenced from the external service (or earlier if staff in school feels support may not be appropriate)
	Assessment, Risk Assessment and MARF for those children at risk of significant harm.				

Step	Description	pupil	Parent/carer	Staff involved	Review
4	Higher level of mental health assessment and interventions from Medical Professionals – CAMHs/GP SPA referral	Understands the need for this approach and with support can embrace without fear	Parent/carer will be involved and supported with the referral process.	Safeguarding lead, mental health lead, SENco, SMT. Wellbeing staff/class staff in school checking in on how the pupil is finding the external service.	Carry out evaluation when support has commenced from the external service (or earlier if staff in school feels support may not be appropriate)

Step	Description	pupil	Parent/carer	Staff involved	Review
5	Immediate care and mental health medical intervention	Understands the need for this level of support and is reassured	Working collaboratively with School whilst support through emergency services is given	SMT/SLT	Reviewed Daily until de-escalated.

Impact: Positive Mental health Outcomes

- Pupils will have:
- Increased Self-confidence and self-esteem
- The ability to maintain and build trusting relationships
- Increased abilities to co or self-regulate when feeling overwhelmed
- Feel able to manage difficult/uncomfortable feelings.