

Peacehaven Community School

Positive Mental Health & Wellbeing Policy

Document Management

Date Approved: September 2024

Next review date: September 2025

Approved by: Headteacher and Chair of Governors

Table of Contents

Policy Rationale, Scope and Aim	2
Policy Aim	2
Members of Staff	3
Staff Wellbeing	3
Support Plan	4
Teaching about Mental Health and Wellbeing	4
Signposting	4
Warning Signs	4
Managing Disclosures	5
Working with Parents	6
Training	6

Policy Rationale, Scope and Aim

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). In an average classroom, five children will be suffering from a mental health condition.

At Peacehaven Community School, we aim to promote positive mental health for every member of our staff and student body. 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.

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

This policy should be read in conjunction with our medical information 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.

Policy Aims

- 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 mental ill health and their peers and parents/carers.

Members of Staff

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

Mental Health and Wellbeing Leads	Mat Verniol & Ann-Marie Waite
Designated Safeguarding Lead (DSL)	Mat Verniol
School Counsellor	Nicolas Pope
School Early Help Keyworker	Jenna Tucker
Staff Wellbeing Lead/ ELSA	Sonia Elliott
Pastoral Lead year 11	Claire Willis
Pastoral Lead year 10	Kate Leggett
Pastoral Lead year 9	Harry Millar
Pastoral Lead year 8	Michelle Pollard
Pastoral Lead year 7	Jane McCaughan
ELSA (Emotional Literacy Support Assistant)	Sherrie Seymour
Lead First Aider	Dawn O'Neill

Any member of staff who is concerned about the mental health or wellbeing of a student should contact the Safeguarding team in the first instance. If there is a danger of immediate harm then the DSL team needs to be contacted immediately and the usual safeguarding procedures are followed. 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 is appropriate, this will be led and managed by the Safeguarding team and Pastoral Managers.

Staff Wellbeing

It is important for the staff to have a named person to maintain the importance of mental health issues and to champion their interest. This role will be to champion mental health for the school community, not to be directly responsible for it. The role will include promotion of well-being materials; being a 'listening ear'; acting as a signpost for other services or professionals; relaying ideas and information to senior staff that could further improve wellbeing in school; having oversight of school improvement plans to ensure that mental health promotion has a key place; helping to reduce barriers to mental health in school by promoting positive language in relation to mental health.

Support Plan

When a child or young person is diagnosed as having a mental health condition, it is important that a meeting takes place with all stakeholders to support their individual needs. A plan will then be drawn up. This can include:

- reason for the plan - including details of a pupil's condition, special requirements and precautions, medication and any side effects
- resources
- what needs to be done and by whom - who to contact in an emergency
- any contingency arrangements, if necessary
- advice for staff on managing any associated behaviours
- arrangements for reviewing the plan.

Teaching about Mental Health and Wellbeing

The skills, knowledge and understanding needed by our pupils to keep themselves and others physically and mentally healthy and safe are included as part of our PSHE curriculum and dedicated PDI sessions.

The specific content of lessons will be determined by the specific needs of the cohort we are teaching but there will always be an emphasis on enabling pupils to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

Signposting

We will ensure that staff, students and parents are aware of sources of support within school and in the local community. What support is available within our school and local community can be accessed via this [link](#).

We will display relevant sources of support in communal areas 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.

Warning Signs

School 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 record them onto CPOMS, the school's safeguarding reporting system.

Possible warning signs include:

- evident changes in behaviour
- 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
- reduced concentration
- lowering of academic achievement
- talking, joking or researching 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
- an increase in lateness to or absence from school
- repeated physical pain or nausea with no evident cause
- spending more time at the bathroom
- discontinued hobbies or interests
- failure to take care of personal appearance
- seemingly overly cheerful after a bout of depression.

Managing disclosures

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 further information please look at our [Child Protection and Safeguarding Policy](#). All disclosures should be recorded onto CPOMS.

We should be honest with regards to the issue of confidentiality. If we judge that it is necessary for us to pass our concerns about a student on, then we should discuss with the student:

- who we are going to talk to
- what we are going to tell them
- why we need to tell them.

We should never 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 staff and/ or a parent, e.g. where a young person up to the age of 16 is at risk.

It is always advisable to share disclosures with a colleague, usually the Safeguarding team as this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the student, 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 it would be most appropriate and helpful to share this information with. Parents should be informed and students may choose to tell their parents themselves.

If a child gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but the DSL team must **be informed immediately**.

Working with Parents

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 get 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
- share ideas about how parents can support positive mental health in their children through our regular information evenings.

Where it is deemed appropriate to inform parents, we need to be sensitive in our approach. Before disclosing to parents or 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?
- Who should be present? Consider parents, the student, other members of staff.
- What are the aims of the meeting?

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 often have many questions as they process the information. We should finish each meeting with agreed next steps and always keep a record of the meeting on CPOMS.

Training

As a minimum, all staff will receive regular training about recognising and responding to mental health issues and receive annual child protection training in order to enable them to keep students safe.

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.