



Mental Health Policy

2020-2023

This policy is reviewed every three years and was agreed by the Governing Body of Chellaston Junior School in Autumn 2020 **and will be reviewed again in Autumn 2023**

Signed: _____ Chair of Governors

Date: _____

Non-Statutory Policy

Mental Health Policy

Aims and Vision

Chellaston Junior School 

“Together we are **stepping to success**. Together we are **working to achieve our best**.”



Our aim In striving to become an outstanding school, at CJS we will help ALL pupils to be:

- **Successful Learners** who enjoy learning, make excellent progress and achieve very high standards across the curriculum
- **Confident Individuals** who are able to lead happy, safe, healthy and fulfilling lives
- **Responsible Citizens** who make a positive contribution to British and the global society

Aims of the 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 Organization)

At our school, we aim to promote positive mental health for every child and member of staff. We pursue this aim using both whole school approaches and specialised, targeted approaches aimed at vulnerable pupils.

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. In an average classroom, three children will be suffering from a diagnosable mental health issue. By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for pupils affected both directly and indirectly by mental ill health.

This policy 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 pupil's mental health overlaps with or is linked to a medical issue and the SEND policy where a pupil has an identified special educational need.

The Policy Aims to:

- Promote positive mental health in all staff and pupils
- 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 pupils suffering mental ill health and their peers and parents or carers

Lead Members of Staff

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

- A. Smythe – Designated Safeguarding Lead
- J. Deane- Robson – Deputy Designated Safeguarding Lead
- K. Bell - Mental Health leader
- K. Daintith - Welfare Assistant/Emotional Literacy Support Assistant
- K. Price - CPD leader
- J. Collins - PSHE leader

Any member of staff who is concerned about the mental health or wellbeing of a pupil should log the concern, using CPOMS (online alerting system). The relevant members of staff, with links to the child, will be then be informed. If there is a fear that the pupil is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the Designated Safeguarding Lead, Deputy Designated Safeguarding Lead or the designated governor. If the pupil 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 the Educational Psychologist or CAMHS is appropriate, this will be led and managed by J. Deane Robson (Deputy Designated Safeguarding Lead).

Signposting

We will ensure that staff, pupils and parents are aware of sources of support within school and in the local community. Information will be available on the school website and leaflets will be accessible in reception. Updates and links to sources of support are shared with families on School Dojo.

We will display relevant sources of support in communal areas such as common rooms and toilets and will regularly highlight sources of support to pupils within relevant parts of the curriculum. Whenever we highlight sources of support, we will increase the chance of pupil help-seeking by ensuring pupils understand:

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

Section 1 – Supporting our Children

Individual Care Plans

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

Teaching about Mental Health

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 developmental PSHE 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 pupils to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

We will follow the Cambridgeshire PSHE Service to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

Pupils are taught about mental health and well being through whole school assemblies and classroom discussions regularly throughout the school year.

Warning Signs

School staff may become aware of warning signs which indicate a pupil 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 log their concerns using CPOMS (and if necessary, speak directly to safeguarding leads A.Smythe/J. Deane-Robson).

Possible warning signs include: *(This list is not exhaustive)*

- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating or sleeping habits
- Increased isolation from friends or family, becoming socially withdrawn
- 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 secretly
- Lateness to or absence from school
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

Early identification

Our identification system involves a range of processes. We aim to identify children with mental health needs as early as possible. We do this in many different ways, including:

- Analysing pupils' behaviour (yellow/red cards from class and orange/red stars from the playground are reviewed weekly)
- Class teachers/K.Daintith to observe number of visits to medical room
- Staff report concerns to relevant member of pastoral team
- 'Something to say' boxes in each classroom for children to raise concerns

- Termly pupil progress meetings
- Transition meetings/discussions with previous school at transfer
- Formal parents meetings twice in the year
- Promoting an environment where children and parents understand they can speak to any member of staff about a concern

Any member of staff with a concern will take it seriously and report using CPOMS. If this is not possible, staff will communicate directly with a member of the pastoral team.

Managing disclosures

A pupil may choose to disclose concerns about themselves or a friend to any member of staff so all staff need to know how to respond appropriately to a disclosure.

If a pupil 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 pupil's emotional and physical safety rather than of exploring 'Why?'

All disclosures should be recorded in writing, using CPOMS and held on the pupil's confidential file. 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 deputy safeguarding lead (J. Deane Robson) who will store the record appropriately and offer support and advice about next steps.

Confidentiality

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

- 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 pupil 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. Pupils may choose to tell their parents themselves. If this is the case, the pupil should be given 24 hours to share this information before the school contacts parents. (Staff should discuss with the pupil again and contact parents after 24 hours in order to ensure the pupil has informed their parents as agreed.) We should always give pupils the option of us informing parents for them or with them.

If a child gives us reason to believe that there may be underlying child protection issues (and we believe there is a risk to the immediate safety of the child), parents should not be informed, but the Designated Safeguarding Lead (A.Smythe) must be informed immediately. Procedures will then follow the school's safeguarding policy. If staff do not believe there is an immediate risk, we will explore, with parents, the concerns that have been raised, before deciding if a referral to CSC needs to be made. (See section on Informing Parents below)

It is always advisable to share disclosures with a colleague, usually the Headteacher. This helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the pupil, it ensures continuity of care in our absence; and it provides an extra source of ideas and support. We should explain this to the pupil and discuss with them who it would be most appropriate and helpful to share this information with.

Informing Parents

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

It can be shocking and upsetting for parents 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 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 parents can also be helpful too, e.g. parent 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 parents 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 the child's confidential record.

Supporting Peers

When a pupil 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 from each other. In order 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 with the pupil who is suffering and their parents with whom we will discuss:

- What it is helpful for friends to know and what they should not be told
- How friends can best support
- Things friends should avoid doing or saying which may inadvertently cause upset
- Warning signs that their friend may need 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

Section 2 – Supporting our Parents

We will aim to provide parents with relevant guidance and information 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 go about this, if they have concerns about their own child or a friend of their child, or themselves
- Make our mental health policy easily accessible to parents
- Share ideas about how parents can support positive mental health in their children through information evenings
- Keep parents informed about the mental health topics their children are learning about in PSHE and share ideas for extending and exploring this learning at home
- Highlight the importance of looking after their own mental health and offer support and guidance if parents are in need.

Section 3 – Supporting staff

Supporting and promoting positive mental health and well being of staff is an essential component of a healthy school and we promote opportunities to maintain a healthy work life balance. Staff are encouraged to talk to team leaders if there are circumstances which could affect their well being.

Training

We want all staff to be confident in their knowledge of mental health and well being and to be able to promote positive mental health. Staff need to feel secure in identifying early warning signs and know what to do and where to get help. Our mental health lead and safeguarding deputy are trained mental health first aid.

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

We will signpost staff to optional training opportunities as and when they arise.

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 pupils.

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 Mrs Price (CPD Lead) and K Bell (Mental Health Lead), who can also highlight sources of relevant training and support for individuals as needed.

Inclusion

Our school is an inclusive school. We aim to make all pupils feel included in all our activities. We try to make all our teaching fully inclusive. We recognise the entitlement of all pupils to a balanced, broadly-based curriculum. We have systems in place for early identification of barriers to their learning and participation so that they can engage in school activities with all other pupils. We acknowledge the need for high expectations and suitable targets for all children.

Equality Statement

At Chellaston Junior School, we actively seek to encourage equity and equality through our teaching. As such, we seek to advance the equality of opportunity between people who share any of the following characteristic:

- sex;
- ethnicity;
- disability;
- religion or belief;
- sexual orientation;
- gender reassignment;
- pregnancy or maternity.

The use of stereotypes under any of the above headings will always be challenged.