MENTAL HEALTH
and
WELL-BEING POLICY

POLICY STATEMENT

At Avondale Preparatory School, we are committed to supporting the emotional health and wellbeing of our pupils and staff.

We have a supportive and caring ethos, and our approach is respectful and kind, where each individual and contribution is valued.

At our school, we know that everyone experiences life challenges that can make us vulnerable and at times, anyone may need additional emotional support. We take the view that positive mental health is everybody's business and that we all have a role to play.

At our school we:

- help children to understand their emotions and feelings better
- help children feel comfortable sharing any concerns or worries
- help children socially to form and maintain relationships
- promote self-esteem and ensure children know that they count
- encourage children to be confident and 'dare to be different'
- help children to develop emotional resilience and to manage setbacks

We promote a mentally healthy environment through:

- promoting our school values and encouraging a sense of belonging
- promoting pupil voice and opportunities to participate in decision-making
- celebrating academic and non-academic achievements
- providing opportunities to develop a sense of worth through taking responsibility for themselves and others
- providing opportunities to reflect
- providing a 'calm corner' in EYFS
- access the appropriate support that meets their needs
- a Buddy Bench
- KS1 & KS2 Peer Mediators
- worry monsters in each cohort
- 2x 5 minute meditation/mindfulness sessions weekly
- 'Mindfulness' after school club
- recognising World Mental Health Day

Definition of Mental Health and Well-Being

We use the World Health Organisation's (WHO) 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.'

Mental health and well-being are 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

A Whole School Approach to Promoting Positive Mental Health

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

This encompasses seven aspects:

1. creating an ethos, policies and behaviours that support mental health and resilience that everyone understands
2. helping pupils to develop social relationships, support each other and seek help when they need to
3. helping pupils to be resilient learners
4. teaching pupils social and emotional skills and an awareness of mental health
5. early identification of pupils who have mental health needs and planning support to meet their needs, including working with specialist services
6. effectively working with parents and carers
7. supporting and training staff to develop their skills and resilience

We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues and aim to create an open and positive culture that encourages discussion and understanding of mental health issues. We aim to be a 'talking school' with an 'Open Door Policy'.

Roles and Responsibilities

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

All staff understand about possible risk factors that might make some children more likely to experience problems; such a 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 also understand the factors that protect children from adversity, such as self-esteem, communication and problem-solving skills, a sense of worth and belonging and emotional literacy.

Designated Safeguarding Person and SENDCo:

- lead on and work with other staff to coordinate whole-school activities to promote positive mental health
- provides advice and support to staff and organises training and updates
- keeps staff up to date with information about what support is available
- liaises with the PSHCE Leader (Non-core Subjects Lead – GBT) on teaching about mental health
- is the first point of contact and communicates with mental health services
- leads on and makes referrals to services

We recognise that many behaviours and emotional problems can be supported within the school environment, or with advice from external 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 pupils with mental health needs and their families.

Support includes:

- Safeguarding/Child Protection Team
- Support staff to manage mental health needs of pupils
- SENDCo who helps staff understand their responsibilities to children with special educational needs and disabilities (SEND), including pupils whose mental health problems mean they need special educational provision
- CAMHS core meetings to support staff to manage mental health needs of pupils

Training

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.

The MindEd learning portal provides free online training suitable for staff wishing to know more about a specific issue. https://www.totaralearning.com/en/customer-stories/minded

Our approach is to:

- provide a safe environment to enable pupils to express themselves and be listened to
- ensure the welfare and safety of pupils as paramount
- identify appropriate support for pupils based on their needs
- involve parents and carers when their child needs support
- involve pupils in the care and support they have monitor, review and evaluate the support with pupils and keep parents and carers updated

Early Identification:

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:

- identify individuals that might need support
- working with the Office Manager who is often the first point of contact with families seeking support
- induction meetings for pupils/families joining after the Reception year
- analysing behaviour, attendance, and Behaviour Forms/Anti-Bullying Forms
- staff report concerns about individual pupils during weekly staff meetings, the SENDCo can access these concerns through the minutes of the meeting
- worry monsters in each cohort for pupils to raise concerns which are checked by the class teacher
- gathering information from a previous school at transfer or transition
- parental meetings
- enabling pupils to raise concerns to class teacher and support staff
- enabling parents and carers to raise concerns through the school class teacher or to any member of staff - we have an 'Open Door Policy'

All staff have had training on the risk and protective factors *(see Appendix 1),* types of mental health needs *(see 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 Designated Safeguarding Person or SENDCo.

These signs might include:

- non-verbal behaviour
- isolation from friends and family and becoming socially withdrawn
- changes in activity or mood or eating/sleeping habits
- lowering academic achievement
- talking or joking about self-harm or suicide
- expressing feelings of failure, uselessness or loss of hope
- an increase in lateness or absenteeism
- not wanting to do PE or get changed for PE
- physical signs of harm that are repeated or appear non-accidental
- wearing long sleeves in hot weather
- repeated physical pain or nausea with no evident cause

Staff are aware that mental health 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.

If there is a concern that a pupil is in danger of immediate harm, then the school's child protection procedures are followed. A risk assessment and plan will be made.

Verbal Disclosures by Pupils:

We recognise how important it is that staff are calm, supportive, and non-judgmental to pupils who verbally disclose a concern about themselves or a friend. The emotional and physical safety of pupils is paramount, and staff listen rather than advise. Staff are clear to pupils that the concern will be shared with the Designated Safeguarding Person or the SENDCo and recorded, to provide appropriate support to the pupil.

Non-Verbal Disclosures by Pupils:

Staff also recognise persistent and unusual non-verbal disclosures in behaviours in line with the National Institute for Health & Care Excellence (NICE) recommendation that behaviour may be an unmet need or message.

Confidentiality:

All disclosures are recorded and held on the pupil's confidential file, including date, name of pupil and member of staff to whom they disclosed, summary of the disclosure and next steps.

Assessment, Interventions and Support:

All concerns are reported to the Designated Safeguarding Team or SENDCo and recorded. We then implement our assessment system based on levels of need to ensure that pupils get the support they need, either from within the school or from an external specialist service. Our aim is to put in place interventions as early as possible to prevent problems escalating.

We recognise that just like physical health, mental health and emotional well-being can vary at any given time and is fluid and changes, there are no absolutes.

Need	Evidence-based Intervention and Support	Monitoring
The level of need is based on discussions during staff meetings	The kinds of intervention and support provided will be decided in consultation with key members of staff, parent/carers and pupils *For example:*	
Highest need	CAMHS-assessment, 1:1 or family support or treatment, consultation with school staff and other agencies School Mentor/counsellor - 1:1 support Educational Psychologist involvement External agency support that provides 1:1 support and group work	All pupils needing targeted individualised support will have an Individual Care Plan drawn up setting out - • The needs of the pupils • How the pupil will be supported • Actions to provide that support

Need …/cont	Evidence-based Intervention and Support …/cont	Monitoring …/cont
Highest need …/cont	Weekly Music Therapy on site If the school, professionals and/or parents conclude that a statutory education, health and care assessment is required, we refer to the SEND policy and SEN School Information Report.	• Any special requirements Pupils and parents/carers will be involved in the plan. The plan and interventions are monitored, reviewed, and evaluated to assess the impact e.g., through a Strengths and Difficulties Questionnaire Multi-agency meetings and regular reviews and feedback with parents/carers Early Help Referral and Children's Services if appropriate Discussion, advice and support in Child and Mental Health Services (CAMHS) core hours for key staff An electronic log is kept and there are regular safe-guarding team meetings Weekly staff meetings
Some need	1:1 intervention, small group intervention, skills for life/wellbeing programmes, circle of friends	
Low need	General support e.g., Class Teacher/TA, Office Manager/Bursar	

Working with Specialist Services to get swift access to the right Specialist Support and Treatment:

In some cases, a pupil's mental health needs require support from a specialist service. These might include anxiety, depression, school refusal and other complex needs.

We make links with a range of specialist services and have regular contact with the services to review the support and consider next steps, as part of monitoring the pupils' provision.

School referrals to a specialist service will be made by the SENDCo following the assessment process and in consultation with the pupil and his/her parents/carers. Referrals will only go ahead with the consent of the parent/carer and when it is the most appropriate support for the pupil's specific needs.

Specialist Service	Referral process
Child and Adolescent Mental Health Service (CAMHS)	Accessed through school, GP, or self-referral
Educational Psychologist	Accessed through the SENDCo
Early Help Referral	Accessed through the SENDCo, EYFS Lead, Designated Safeguarding Person

Involving Parents and Carers - Promoting Mental Health:

We recognise the important role parents/carers have in promoting and supporting the mental health and wellbeing of their children and supporting their children with mental health needs.

To support parents and carers:

- we organise a range of Mental Health workshops accessing expertise from voluntary services, as required. This includes topics such as Anxiety, Stress Management and Sleep.
- we provide information and signposting to organisations on our website on mental health issues and local wellbeing and parenting programmes.
- have an 'Open Door' Policy
- supporting parents and carers with children with mental health needs through sensitive and supportive regular meetings and signposting.

When a concern has been raised the school will:

- contact parents/carers and meet with them
- in most cases, parents and carers will be involved in their children's interventions, although there may be circumstances when this may not happen, such as child protection issues
- offer information to take away and places to seek further information
- be available for follow up calls
- make a record of the meeting
- agree an Action Plan
- discuss how the parents/carers can support their child
- keep parents/carers up to date and fully informed of decisions about the support and interventions

Parents and carers will always be informed if their child is at risk of danger.

We make every effort to support parents/carers to access services where appropriate. Pupils are our primary concern, and in the rare event that parents/carers are not accessing services, we will seek advice from the Local Authority.

Involving Pupils:

- we seek pupils' views and feedback about our approach and whole school mental health activities through surveys, class questions and School Council meetings
- we have 'Peer Mediators' for KS1 and KS2 to support vulnerable children in school

Supporting and Training Staff:

We want all staff to be confident in their knowledge of mental health and wellbeing and to be able to promote positive mental health and wellbeing, identify mental health needs early in pupils and know what to do and where to get help *(see Appendix 2).*

Those staff with a specific responsibility have more specialised training and where possible access to supervision from mental health professionals.

Supporting and promoting the mental health and wellbeing of staff is an essential component of a healthy school and we promote a healthy work life balance and wellbeing.

Appendix 1
Risk and Protective factors (adapted from Mental Health and Behaviour DfE March 2021)

	Risk Factors	Protective Factors
In the child	- genetic influences - low IQ and learning disabilities - specific development delay or neurodiversity - communication difficulties - difficult temperament - physical illness - academic failure - low self-esteem	- secure attachment experience - outgoing temperament as an infant - good communication skills, sociability - being a planner and having a belief in control - humour - 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 - Parental psychiatric illness - Parental criminality, alcoholism, or personality disorder - Death and 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

	Risk Factors …/cont	**Protective Factors** …/cont
In the school	• Bullying including online (cyber) • Discrimination • Breakdown in or lack of positive friendships • Deviant peer influences • Peer pressure • Peer on peer abuse • Poor pupil to teacher/school staff relationships	• Clear policies on behaviour and bullying • Staff behaviour policy (also known as code of conduct) • 'Open door' policy for children to raise problems • A whole-school approach to promoting good mental health • Good pupil to teacher/school staff relationships • Positive classroom management • A sense of belonging • Positive peer influences • Positive friendships • Effective safeguarding and Child Protection policies. • An effective early help process • Understand their role in and be part of effective multi-agency working • Appropriate procedures to ensure staff are confident to raise concerns about policies and processes, and know they will be dealt with fairly and effectively
In the community	• Socio-economic disadvantage • Homelessness • Disaster, accidents, war or other overwhelming events • Discrimination • Exploitation, including by criminal gangs and organised crime groups, trafficking, online abuse, sexual exploitation, and the influences of extremism leading to radicalisation • 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 activities

Appendix 2
Specific mental health needs most commonly seen in school-aged children

Short term stress and worry is a normal part of life, and many issues can be experienced as mild or transitory challenges for some children and their families. Others will experience more serious and longer lasting effects. The same experience can have different effects on different children depending on other factors in their life. For example, it is normal for children to feel nervous or under stress around exam times, but other factors can make such stress part of an enduring and persistent mental health problem for some children. When a problem is particularly severe or persistent over time, or when a number of these difficulties are experienced at the same time, children are often described as experiencing mental health problems.

Where children experience a range of emotional and behavioural problems that are outside the normal range for their age, they might be described as experiencing mental health problems or disorders. Mental health professionals have classified these as:

- emotional disorders, for example phobias, anxiety states and depression
- conduct disorders, for example stealing, defiance, fire-setting, aggression and anti-social behaviour
- hyperkinetic disorders, for example disturbance of activity and attention
- developmental disorders, for example delay in acquiring certain skills such as speech, social ability or bladder control, primarily affecting children with autism and those with pervasive developmental disorders
- attachment disorders, for example children who are markedly distressed or socially impaired as a result of an extremely abnormal pattern of attachment to parents or major care givers
- Trauma disorders, such as post-traumatic stress disorder, as a result of traumatic experiences or persistent periods of abuse and neglect
- other mental health problems including eating disorders, habit disorders, somatic disorders; and psychotic disorders such as schizophrenia and manic-depressive disorder

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Non-professional diagnoses, however well meant, can exacerbate, or promote mental health problems. Schools, however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. This may include withdrawn pupils whose needs may otherwise go unrecognised.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/755135/Mental_health_and_behaviour_in_schools__.pdf

Appendix 3
Where to get information and support

For support on specific mental health needs:

Organisation	Web Site
Anxiety UK	www.anxietyuk.org.uk
OCD UK	www.ocduk.org
Depression Alliance	www.depressoinalliance.org
Eating Disorders	www.b-eat.co.uk
	www.inourhands.com
National Self-Harm Network	www.nshn.co.uk
Self-Harm	www.selfharm.co.uk
Suicidal thoughts	prevention of young suicide UK
	www.papyrus-uk.org

For general information and support:

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