



Pupil mental health and wellbeing policy

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1. Aims

At Penair School, we are committed to supporting the mental health and wellbeing of pupils, parents, carers, staff and other stakeholders.

This policy focuses on pupils' mental health and wellbeing. It aims to:

- Set out our school's approach to promoting positive mental health and wellbeing for all pupils across our school

- Provide guidance to staff on their role in supporting pupils' mental health and wellbeing, including how they can foster and maintain an inclusive culture in which pupils feel able to talk about and reflect on their experiences of mental health
- Support staff to identify and respond to early warning signs of mental health issues
- Inform pupils and their parents/carers about the support they can expect from our school in respect of pupils' mental health and wellbeing, and provide them with access to resources

This policy should be read alongside:

- SEND policy
- Behaviour policy
- Child protection and safeguarding policy
- Equality & Diversity policy

2. Legislation and guidance

This policy was written with regard to:

- [The Equality Act 2010](#)
- [The Data Protection Act 2018](#)
- Articles 3 and 23 of the [UN Convention on the Rights of the Child](#)

3. Roles and responsibilities

All staff are responsible for promoting positive mental health and wellbeing across our school and for understanding risk factors. If any members of staff are concerned about a pupil's mental health or wellbeing, they should inform the designated safeguarding lead (DSL)/mental health lead – Mrs Neesham Ineesham@penair.cornwall.sch.uk

Certain members of staff have extra duties to lead on mental health and wellbeing in school. These members of staff include:

- Headteacher
- Designated safeguarding lead (DSL)
- Special educational needs co-ordinator (SENCO)
- Student Welfare Officers (SWO)
- Personal Development Leaders (PDL)

4. Warning signs

All staff will be on the lookout for signs that a pupil's mental health is deteriorating. Some warning signs include:

Changes in:

- Mood or energy level
- Eating or sleeping patterns
- Attitude in lessons or academic attainment
- Level of personal hygiene
- Social isolation
- Poor attendance or punctuality
- Expressing feelings of hopelessness, anxiety, worthlessness or feeling like a failure
- Abuse of drugs or alcohol
- Rapid weight loss or gain
- Secretive behaviour
- Covering parts of the body that they wouldn't have previously
- Refusing to participate in P.E. or being secretive when changing clothes
- Physical pain or nausea with no obvious cause
- Physical injuries that appear to be self-inflicted
- Talking or joking about self-harm or suicide

5. Managing disclosures

If a pupil makes a disclosure about themselves or a peer to a member of staff, staff should remain calm, non-judgmental and reassuring.

Staff will focus on the pupil's emotional and physical safety, rather than trying to find out why they are feeling that way or offering advice.

Staff will always follow our school's safeguarding policy and pass on all concerns to the DSL. All disclosures are recorded and stored on My Concern.

6. Confidentiality

Staff will not promise a pupil that they will keep a disclosure secret – instead they will be upfront about the limits of confidentiality.

A disclosure cannot be kept secret because:

- Being the sole person responsible for a pupil's mental health could have a negative impact on the member of staff's own mental health and wellbeing
- The support put in place for the pupil will be dependent on the member of staff being at school
- Other staff members can share ideas on how to best support the pupil in question

Staff should always share disclosures with at least 1 appropriate colleague. This will usually be the DSL. If information needs to be shared with other members of staff or external professionals, it will be done on a need-to-know basis.

Before sharing information disclosed by a pupil with a third party, the member of staff will discuss it with the pupil and explain:

- Who they will share the information with
- What information they will share
- Why they need to share that information

Staff will attempt to receive consent from the pupil to share their information, but the safety of the pupil comes first.

Parents/carers will be informed unless there is a child protection concern. In this case safeguarding policy will be followed.

6.1 Process for managing confidentiality around disclosures

1. Pupil makes a disclosure
2. Member of staff offers support
3. Member of staff explains the issues around confidentiality and rationale for sharing a disclosure with DSL
4. Member of staff will attempt to get the pupil's consent to share – if no consent is given, explain to the pupil who the information will be shared with and why
5. Member of staff will record the disclosure and share the information with the chosen elected member of staff
6. The DSL will inform the parent/carer (if appropriate)
7. Any other relevant members of staff or external professionals will be informed on a need-to-know basis

7. Supporting pupils

7.1 Baseline support for all pupils

As part of our school's commitment to promoting positive mental health and wellbeing for all pupils, our school offers support to all pupils by:

Raising awareness of mental health during assemblies, tutor time and PSHE.

- Raising awareness of mental health during assemblies, tutor time and PSHE.
- Signposting all pupils to sources of online support in assemblies, tutor time, PSHE lessons, posters across the school and information on our school website.
- Having open discussions about mental health during lessons.
- Providing pupils with opportunities for student voice to provide feedback on any elements of our school that is negatively impacting their mental health.
- Providing pupils with the opportunity to become mental health champions in year 8 and year 9 to support other students and raise the profile of mental health across the school.

- Monitoring all pupils' mental health through assessments, e.g. a strengths and difficulties questionnaire.
- Offering pastoral support, e.g. SWOs and PDLs and the Better Together Group
- Making classrooms a safe space to discuss mental health and wellbeing through clear ground rules around discussions set out at the start of every PSHE lesson.

7.2 Assessing what further support is needed

If a pupil is identified as having a mental health need, the DSL and SWO will take a graduated and case-by-case approach to assessing the support our school can provide, further to the baseline support detailed above in section 7.1. This will happen in agreement and consultation with parents and any other relevant healthcare / professionals.

Our school will offer support in cycles of:

- Assessing what the pupil's mental health needs are
- Creating a plan to provide support
- Taking the actions set out in the plan
- Reviewing the effectiveness of the support offered

7.3 Internal mental health interventions

Where appropriate, a pupil will be offered support that is tailored to their needs as part of the graduated approach detailed above. The support offered at our school includes:

- Internal group sessions – Soundbath, Contrast therapy - Sea Swim, State of Mind
- Small group or 1:1 wellbeing intervention with student welfare officers
- Targeted group work
- Adapted timetable – possible Harbour provision
- Time-out pass
- Counselling

7.4 Individual healthcare plans (IHPs)

A pupil will be offered an individual healthcare plan (IHP) if deemed necessary by the DSL/SWO.

IHPs are written in collaboration with the pupil (if appropriate), their parent/carer, and any other relevant professionals.

The pupil's IHP will contain the following details:

- The mental health issue (and its triggers, signs, symptoms and treatments)
- The pupil's needs resulting from the condition
- Specific support for the pupil's educational, social and emotional needs

- The level of support needed
- Who will provide the support
- Who in our school needs to be aware of the child's condition
- What to do in an emergency

7.5 Making external referrals

If a pupil's needs cannot be met by the internal offer our school provides, our school will make, or encourage parents/carers to make, a referral for external support.

A pupil could be referred to:

- Their GP or a paediatrician
- CAMHS
- Mental health charities (e.g. [Samaritans](#), [Mind](#), [Young Minds](#), [Kooth](#))
- Local counselling services
- School counselling services

8. Supporting and collaborating with parents/carers

We will work with parents/carers to support pupils' mental health by:

- Asking parents/carers to inform us of any mental health needs their child is experiencing, so we can offer the right support
- Informing parents/carers of mental health concerns that we have about their child
- Engaging with parents/carers to understand their mental health and wellbeing issues, as well as that of their child, and support them accordingly to make sure there is holistic support for them and their child
- Highlighting sources of information and support about mental health and wellbeing on our school website, including the mental health and wellbeing policy
- Liaising with parents/carers to discuss strategies that can help promote positive mental health in their child
- Providing guidance to parents/carers on navigating and accessing relevant local mental health services or other sources of support (e.g. parent/carer forums)
- Keeping parents/carers informed about the mental health topics their child is learning about in PSHE, and share ideas for extending and exploring this learning at home

When informing parents/carers about any mental health concerns we have about their child, we will endeavour to do this face-to-face.

These meetings can be difficult, so our school will ensure that parents/carers are given time to reflect on what has been discussed, and that lines of communication are kept open at the end of the meeting.

A record of what was discussed, and action plans agreed upon in the meeting will be recorded and added to the pupil's confidential record.

If appropriate, an individual healthcare plan (IHP) will be created in collaboration with parents/carers (see section 7.4).

9. Supporting peers

Watching a friend experience poor mental health can be very challenging for pupils. Pupils may also be at risk of learning and developing unhealthy coping mechanisms from each other.

We will offer support to all pupils impacted by mental health directly and indirectly. We will review the support offered on a case-by-case basis. Support might include:

- Strategies they can use to support their friends
- Things they should avoid doing/saying
- Warning signs to look out for
- Signposting to sources of external support

10. Signposting

Sources of support are displayed around our school and linked to on our school website, so pupils and parents/carers are aware of how they can get help.

We aim to spread awareness of sources of mental health support in school through parents' evenings and designated contact days throughout the school year.

11. Whole school approach to promoting mental health awareness

11.1 Mental health is taught in PSHE

We follow the [PSHE Association Guidance teaching mental health and emotional wellbeing](#).

Pupils are taught to:

- Develop healthy coping strategies
- Challenge misconceptions around mental health
- Understand their own emotional state
- Keep themselves safe

For more information, see our PSHE curriculum

11.2 Creating a positive atmosphere around mental health

Staff will create an open culture around mental health by:

- Discussing mental health with pupils in order to break down stigma
- Encouraging pupils to disclose when their mental health is deteriorating

12. Training

All staff will be offered training as part of their annual safeguarding training so they:

- Have a good understanding of what pupils' mental health needs are
- Know how to recognise warning signs of mental ill health
- Know a clear process to follow if they identify a pupil in need of help

13. Support for staff

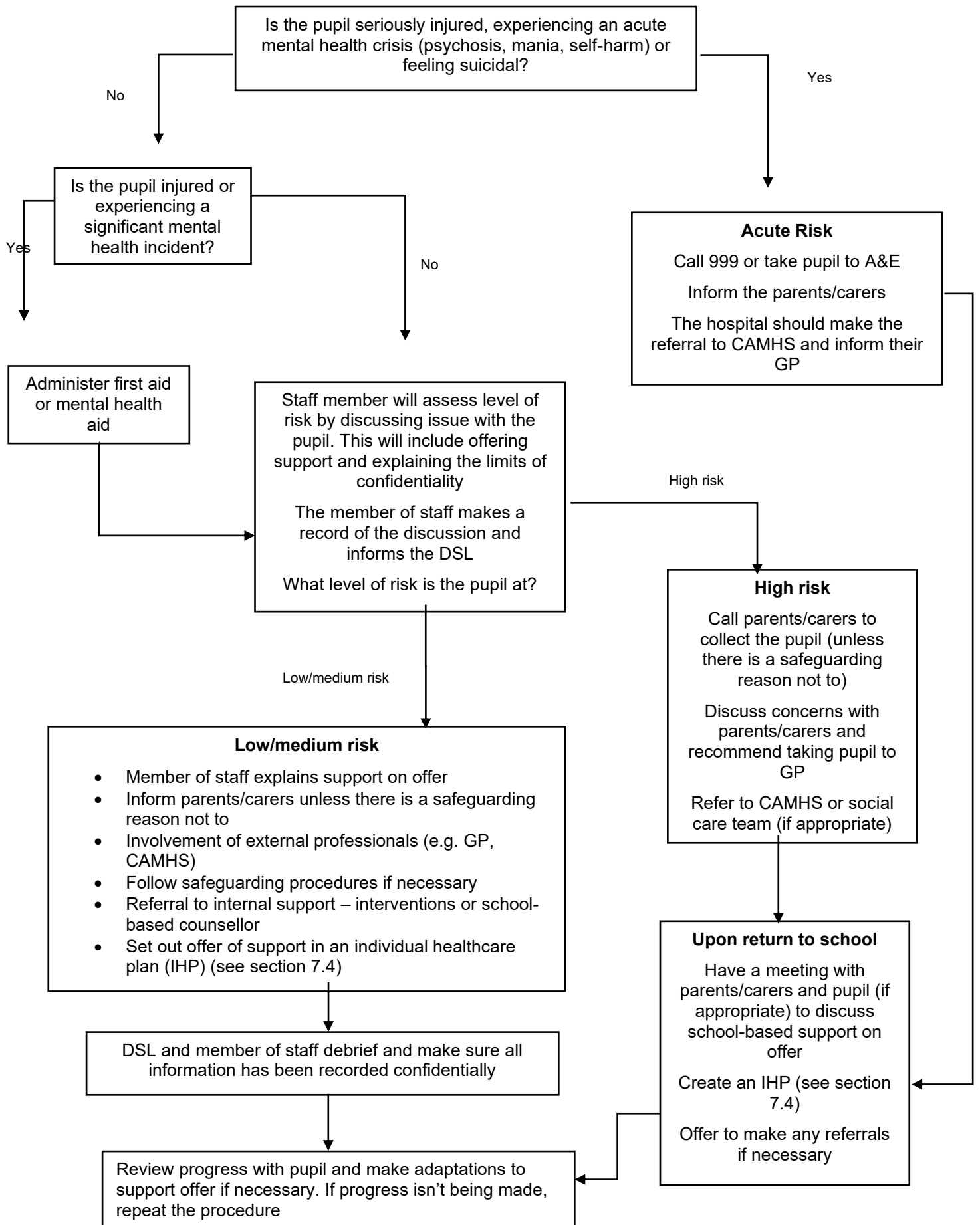
We recognise that supporting a pupil experiencing poor mental health can affect that staff member's own mental health and wellbeing. To help with this we will:

- Treat mental health concerns seriously
- Offer staff support via their line managers
- Support staff experiencing poor mental health themselves
- Create a pleasant and supportive work environment
- Offer an employee assistance programme

14. Monitoring arrangements

This policy will be reviewed by Lisette Neesham, DSL annually. At every review, the policy will be approved by the governing board.

Appendix 1: Procedure to follow in a case of acute mental health crisis



Appendix 2 - Further information and sources of support about common mental health issues

Prevalence of Mental Health and Emotional Wellbeing Issues¹

- 1 in 10 children and young people aged 5 - 16 suffer from a diagnosable mental health disorder - that is around three children in every class.
- Between 1 in every 12 and 1 in 15 children and young people deliberately self-harm.
- There has been a big increase in the number of young people being admitted to hospital because of self harm. Over the last ten years this figure has increased by 68%.
- More than half of all adults with mental health problems were diagnosed in childhood. Less than half were treated appropriately at the time.
- Nearly 80,000 children and young people suffer from severe depression.
- The number of young people aged 15-16 with depression nearly doubled between the 1980s and the 2000s.
- Over 8,000 children aged under 10 years old suffer from severe depression.
- 3.3% or about 290,000 children and young people have an anxiety disorder.
- 72% of children in care have behavioural or emotional problems - these are some of the most vulnerable people in our society.

Below, we have sign-posted information and guidance about the issues most commonly seen in school-aged children. The links will take you through to the most relevant page of the listed website. Some pages are aimed primarily at parents but they are listed here because we think they are useful for school staff too. Support on all of these issues can be accessed via [Young Minds](http://www.youngminds.org.uk) (www.youngminds.org.uk), [Mind](http://www.mind.org.uk) (www.mind.org.uk) and (for e-learning opportunities) [Minded](http://www.minded.org.uk) (www.minded.org.uk).

Suggested reading for teenagers can be accessed here: <https://livespiffy.co.uk/collections/books-for-teenagers>

Self-harm

Self-harm describes any behaviour where a young person causes harm to themselves in order to cope with thoughts, feelings or experiences they are not able to manage in any other way. It most frequently takes the form of cutting, burning or non-lethal overdoses in adolescents, while younger children and young people with special needs are more likely to pick or scratch at wounds, pull out their hair or bang or bruise themselves.

Online support

- [SelfHarm.co.uk](http://www.selfharm.co.uk): www.selfharm.co.uk
- [National Self-Harm Network](http://www.nshn.co.uk): www.nshn.co.uk

Books

- Pooky Knightsmith (2015) *Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies*. London: Jessica Kingsley Publishers

¹ Source: [Young Minds](http://www.youngminds.org.uk)

- Keith Hawton and Karen Rodham (2006) *By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents*. London: Jessica Kingsley Publishers
- Carol Fitzpatrick (2012) *A Short Introduction to Understanding and Supporting Children and Young People Who Self-Harm*. London: Jessica Kingsley Publishers

Depression

Ups and downs are a normal part of life for all of us, but for someone who is suffering from depression these ups and downs may be more extreme. Feelings of failure, hopelessness, numbness or sadness may invade their day-to-day life over an extended period of weeks or months and have a significant impact on their behaviour and ability and motivation to engage in day-to-day activities.

Online support

[Depression Alliance: www.depressionalliance.org/information/what-depression](http://www.depressionalliance.org/information/what-depression)

Books

- Christopher Dowrick and Susan Martin (2015) *Can I Tell you about Depression?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers

Anxiety, panic attacks and phobias

Anxiety can take many forms in children and young people, and it is something that each of us experiences at low levels as part of normal life. When thoughts of anxiety, fear or panic are repeatedly present over several weeks or months and/or they are beginning to impact on a young person's ability to access or enjoy day-to-day life, intervention is needed.

Online support

[Anxiety UK: www.anxietyuk.org.uk](http://www.anxietyuk.org.uk)

Books

- Lucy Willetts and Polly Waite (2014) *Can I Tell you about Anxiety?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers
- Carol Fitzpatrick (2015) *A Short Introduction to Helping Young People Manage Anxiety*. London: Jessica Kingsley Publishers

Obsessions and compulsions

Obsessions describe intrusive thoughts or feelings that enter our minds which are disturbing or upsetting; compulsions are the behaviours we carry out in order to manage those thoughts or feelings. For example, a young person may be constantly worried that their house will burn down if they don't turn off all switches before leaving the house. They may respond to these thoughts by repeatedly checking switches, perhaps returning home several times to do so. Obsessive compulsive disorder (OCD) can take many forms – it is not just about cleaning and checking.

Online support

[OCD UK: www.ocduk.org/ocd](http://www.ocduk.org/ocd)

Books

- Amita Jassi and Sarah Hull (2013) *Can I Tell you about OCD?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers
- Susan Conners (2011) *The Tourette Syndrome & OCD Checklist: A practical reference for parents and teachers*. San Francisco: Jossey-Bass

Suicidal feelings

Young people may experience complicated thoughts and feelings about wanting to end their own lives. Some young people never act on these feelings though they may openly discuss and explore them, while other young people die suddenly from suicide apparently out of the blue.

Online support

- [Prevention of young suicide UK – PAPYRUS: www.papyrus-uk.org](http://www.papyrus-uk.org)
- [On the edge: ChildLine spotlight report on suicide: www.nspcc.org.uk/preventing-abuse/research-andresources/on-the-edge-childline-spotlight/](http://www.nspcc.org.uk/preventing-abuse/research-andresources/on-the-edge-childline-spotlight/)

Books

- Keith Hawton and Karen Rodham (2006) *By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents*. London: Jessica Kingsley Publishers
- Terri A. Erbacher, Jonathan B. Singer and Scott Poland (2015) *Suicide in Schools: A Practitioner's Guide to Multilevel Prevention, Assessment, Intervention, and Postvention*. New York: Routledge

Eating problems

Food, weight and shape may be used as a way of coping with, or communicating about, difficult thoughts, feelings and behaviours that a young person experiences day to day. Some young people develop eating disorders such as anorexia (where food intake is restricted), binge eating disorder and bulimia nervosa (a cycle of bingeing and purging). Other young people, particularly those of primary or preschool age, may develop problematic behaviours around food including refusing to eat in certain situations or with certain people. This can be a way of communicating messages the child does not have the words to convey.

Online support

- [Beat – the eating disorders charity: www.b-eat.co.uk/about-eating-disorders](http://www.b-eat.co.uk/about-eating-disorders)
- [Eating Difficulties in Younger Children and when to worry: www.inourhands.com/eating-difficulties-in-youngerchildren](http://www.inourhands.com/eating-difficulties-in-youngerchildren)

Books

- Bryan Lask and Lucy Watson (2014) *Can I tell you about Eating Disorders?: A Guide for Friends, Family and Professionals*. London: Jessica Kingsley Publishers
- Pooky Knightsmith (2015) *Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies*. London: Jessica Kingsley Publishers
- Pooky Knightsmith (2012) *Eating Disorders Pocketbook*. Teachers' Pocketbooks

Phone Services

- TEXT shout to 85258 for support in a crisis
- Papyrus (Prevention of Young Suicide) Hope Line 0800 068 4141. Text Line 07786209697. Email pat@papyrusuk.org (10am – 10pm weekdays 2-5pm weekends)
- Night Link Emotional Support Service – 08088000306 (5pm – midnight)
- TESS text support (girls/young women affected by self-harm) – 07800472908 (7pm – 9.30pm every day except Saturdays)
- ChildLine Telephone Support – 0800 1111
- Samaritans telephone support – 116 123
- Mind - 0300 123 3393 info@mind.org.uk Text: 86463 Our lines are open 9am to 6pm, Monday to Friday (except for bank holidays).

Websites

- Young Minds – www.youngminds.org.uk
- Anna Freud National Centre for Children and Families: <https://www.annafreud.org/about-us/>
- Charlie Waller Memorial Trust – one of the UK’s most respected mental health charities: <https://charliewaller.org/>
- Kooth – on-line counselling/support for young people www.kooth.com
- Savvy Kernow – health/well-being/help/advice <https://www.supportincornwall.org.uk>
- Mind - www.mind.org.uk
- Place2Be – improving children’s mental health: <https://www.place2be.org.uk/>
- Samaritans www.samaritans.org
- Outlook South West - psychological therapy services are for people aged 16 and above www.outlooksw.co.uk
- Education Support – supporting education staff wellbeing: <https://www.educationsupport.org.uk/>
- Minded for families, children and young people - mindedforfamilies.org.uk

Smart Device Apps - Here are some apps you can download on your smart device

- Smiling Mind – A meditation app that aims to bring balance to individual’s lives, to assist with depression, anxiety and stress, to manage unhelpful thoughts.
- Stop-breath and think – A meditation app featuring a range of exercises at varying lengths
- Calm Harm and stem 4 - An app to support you in managing self-harm urges with a variety of techniques
- Self-Heal – Supports reduction of self-injury. Offers short and long term coping strategies.
- Stay Alive – Offers support both to those experiencing thoughts of suicide and to those concerned about someone else.

- Sam (self-help and anxiety management) – An app designed to help people manage their anxiety levels and identify different triggers
- Pacifica – Uses Cognitive Behavioural Therapy, mindfulness and relaxations based techniques to help with anxiety, depression and stress
- Sleepio – A six week tailored programme accessed online designed to treat insomnia and in doing so help with anxiety and depression.

PUPIL MENTAL HEALTH AND WELLBEING POLICY

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