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Student Mental Health and Emotional Wellbeing Policy

1. Introduction

Mental health is a state of well-being in which every individual realises their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community. (World Health Organisation).

At Fullhurst Community College we are committed to promoting positive mental health and wellbeing for all of our students. Wellbeing is valued and we actively promote it. We pursue this aim using universal, targeted and specialist approaches aimed at vulnerable students. In addition to promoting positive mental health and wellbeing, we aim to recognise and respond to mental ill health.

By developing and implementing practical, relevant and effective mental health and wellbeing policies and procedures, we can promote a safe and stable environment for students affected both directly, and indirectly, by mental ill health.

This policy is about student mental health but of course staff mental health and wellbeing is interrelated. We have considered student voice in relation to this policy as involving students and their parents/carers is essential in ensuring our mental health support is as effective as possible.

"*At times it felt like I was trapped in a prison for years with no way out. It felt suffocating*" (Year 11 student).

"*We are so very grateful for everything you have done for both our boys. Fullhurst has the best team for our children that are special, and the children coming through in the years ahead will have the best start in life, you can't bag that up, you are real people making real differences in our children's lives*". (Parent).

2. Scope

This policy relates to:

1. DfE Research and analysis: Promoting and supporting mental health in schools and colleges (September 2021)
2. DfE Advice on Mental health and behaviour in schools (November 2018)
3. DfE Guidance: Information sharing advice for safeguarding practitioners (July 2018)

This policy should be read in conjunction with the following Fullhurst policies:

1. Safeguarding & Child Protection Policy
2. Anti-Bullying Policy
3. Equal Opportunities Policy
4. Medical Care Policy
5. SEND Policy

3. Aims and objectives

Our student mental health policy has five clear aims to ensure that our most vulnerable students understand how to find help and what support is available to them.

1. Promote positive mental health in all of our students
2. Provide support to students suffering mental ill health and their peers
3. Increase understanding and awareness of common mental health issues
4. Alert staff to early warning signs of mental ill health
5. Provide support to staff working with young people with mental health issues

4. What is meant by 'mental health difficulty'?

A mental health difficulty is one in which a person is distracted or unable to engage with ordinary life due to upsetting, disturbing thoughts and/or feelings. These problems may distort or negatively impact a person's view of the world and produce a variety of symptoms and behaviour likely to cause distress and concern.

Why this matters:

1. Half of lifetime mental illness starts by the age of 14
2. Suicide is one of the leading causes of death for young people
3. In an average classroom, 4 children will have a clinically diagnosed mental health condition, 7 will have been bullied and 8 will have experienced severe physical violence, sexual abuse or neglect
4. Early intervention and a whole school approach can be highly effective in improving wellbeing and reducing the impact of mental health problems

At Fullhurst, we recognise that young people experiencing needs related to their Social, Emotional and Mental Health (SEMH) often need a variety of support in school for them to be successful. For example, a student with hyperactivity may benefit from working some activity into their daily classroom routine. A young person with Oppositional Defiant Disorder might benefit from their teachers being trained to interact with them in a certain way. A young person who struggles with disorganisation might be helped by being taught planning skills. Students who may become aggressive and those who get overly anxious may benefit from exploring what things lead up to

those feelings and being taught strategies to recognise when it is happening and things to do to avoid the problem from escalating.

5. **Vulnerable Children and Young People:**

Social, Emotional, Mental Health (SEMH) is a broad term used to define a range of different needs that students may have at any given time. These needs can appear in a number of different ways, including becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained.

Examples of SEMH needs:

1. Anxiety
2. Attachment
3. ADHD

6. Lead members of staff who can support you:

All staff in school have a responsibility to help and support our students and their mental health. We also have a team of staff with additional responsibilities working across school to support the mental health and wellbeing of all of our students.

Staff directly involved in developing our whole school mental health provision would be especially happy to talk to you and answer any questions:

1. C Murphy- Assistant Principal- SEND, LAC and vulnerable students
2. T Brown- Assistant SENDCo
3. M McKenzie- Safeguarding Officer and External Provisions Coordinator
4. N Chaudry- KS3 SEND Lead
5. M Steane- Head of Year 9
6. L Allen- Counsellor

7. Warning Signs:

At Fullhurst, staff may become aware of warning signs which indicate a student is experiencing mental health or emotional wellbeing issues.

Students who are showing signs of mental distress do not always express problems directly or ask for help, even where there are clear signs that they are having difficulties and could be due to a number of reasons. Students may still feel stigma around mental health problems, or may be concerned about the consequences of telling someone. They may be unaware that they have a problem, or be aware but feel that they have to cope with it on their own.

These warning signs will **always** be taken seriously and staff observing any of these warning signs should communicate their concerns.

1. Possible warning signs include:
2. Physical signs of harm that are repeated or appear non-accidental
3. Changes in eating or sleeping habits
4. Increased isolation from friends or family, becoming socially withdrawn
5. Changes in activity and mood
6. Lowering of academic achievement
7. Talking or joking about self-harm or suicide
8. Abusing drugs or alcohol
9. Expressing feelings of failure, uselessness or loss of hope
10. Changes in clothing – e.g. long sleeves in warm weather
11. Secretive behaviour
12. Truanting PE or getting changed secretively
13. Lateness to or absence from school
14. Repeated physical pain or nausea with no evident cause
15. An increase in lateness or absenteeism

A student causing concern may have a Pupil Passport, Behaviour Support Plan or Safety Plan. These will be produced involving the student, parents/carers and relevant professionals and are reviewed regularly.

A Mental Health Emergency or Crisis:

'A mental health crisis often means that you no longer feel able to cope or be in control of your situation. You may feel great emotional distress or anxiety, cannot cope with day-to-day life or work, think about suicide or self-harm, or experience hallucinations and hearing voices.' NHS, 2019.

There may be instances where a student's behaviour and mental state are concerning and may lead to immediate danger through harm to themselves or others. The following situations or symptoms classify as a mental health emergency:

1. Self-harm
2. Suicidal ideation
3. Hearing voices
4. Psychosis: Experiencing hallucinations and/or delusions.
5. Extreme emotional distress

If a student presents with any of the above problems, relevant staff will go through the following school-wide Mental Health Emergency Protocol Flow-Chart to ensure the pupil, fellow students, and staff members are safe. If the student requires being sent home or is advised to go to A&E, this will be directed by a key member of staff.

Teaching about Mental Health:

The skills, knowledge and understanding needed by our students to keep themselves and others physically and mentally healthy and safe are included as part of our PSHE curriculum. (See Mr Parker-Monks for more information).

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

8. Confidentiality

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

1. Who we are going to talk to
2. What we are going to tell them
3. Why we need to tell them

A student 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 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 nonjudgemental.

9. **Working with all parents/carers:**

Parents/carers are often very welcoming of support and information from the School about supporting their children's emotional and mental health.

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 will always signpost further opportunities for support and information.

In order to support parents we will:

1. Highlight sources of information and support about common mental health issues on our school website and app.
2. 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.
3. Make our Student Mental health and Wellbeing policy easily accessible to parents via the website.
4. Share ideas about how parents can support positive mental health in their children through our regular parent drop ins and other resources.
5. 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.
6. Embed a parent/carer self referral system if they feel their young person needs help and support.

10. **Difficulties with attendance and reintegration to school:**

Should a student require some time out of school, we will be fully supportive of this and every step will be taken in order to ensure a smooth reintegration back into School when they are ready. Please see details of our **Outreach** programme for further information. Students will not commence reintegration to School until a specialist report and/or discussion has occurred outlining a step by step plan of care. The SEND and Pastoral teams will draw up an appropriate welfare plan. The student should have as much ownership as possible with regards to the welfare plan so that they feel they have control over the situation. If a phased return to school is deemed appropriate, this will be agreed with the parents and medical/emotional health professionals.

11. **Fullhurst in school support:**

The following list are examples of interventions being developed with students who are experiencing mental health difficulties:

1. One-to-one intervention with Mentors
2. Group work
3. Reduced/bespoke timetable
4. Time Out Cards

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5. Queue Jump Pass
6. Stress ball/fiddle toy
7. Relaxation space
8. Counselling (Referral only)
9. SEMH Inclusion- 1:1 and small group work
10. Outreach programme (must be supported by medical evidence)
11. Student/parent/carer self referrals
12. Pupil Passports/Behaviour Support Plans/Safety plans/medical care plans
13. School Nurse
14. In school SEMH screening tools and assessments
15. Referrals for external support

8 External Support & Signposting

Students experiencing mental health difficulties are often best helped with support both in and outside school. The following resources can be helpful to review and are often signposted to students in school for support:

1. GP – Your local GP is usually the first person to contact regarding concerns about a child's mental health.
2. Kooth – Online, free counselling for young people.
3. Childline – Free counselling for young people via phone or online.
4. Calm Harm – Free app for self-harm
5. Clear Fear – Free app for anxiety
6. Mind – General mental health support and knowledge.
7. Young Minds – General mental health support and knowledge.
8. Samaritans – Suicide phone-line (116 123)
9. A&E – Young people can be taken to A&E during a mental health emergency or crisis.

In addition, we are working closely to develop links and support with the Educational Psychology Service, SEMH Team, Learning, Communication and Interaction Team and Mental Health Support Teams in Schools, with a named Educational Mental Health Practitioner.

We will display relevant sources of support in communal areas. Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring students understand:

1. What help is available
2. Who it is aimed at
3. How to access it
4. Why to access it
5. What is likely to happen next

9. 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 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. Training can be provided within schools by identifying staff with experience in this area. The SENCO and SEMH Lead will also be able to offer this training. For more advanced training on specific topics, external expertise will be utilised. 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.

We also have a Senior Mental Health Lead in school: Catherine Murphy.
Emma Smith, our Assistant Headteacher, will be leading on whole school mental health.
In addition, members of our pastoral team have also undertaken specific mental health training.

10. Further information and sources of support about common mental health issues:

Below, we have sign-posted information and guidance about the issues most commonly seen in school-aged children. This information will also be useful for parents/carers and school staff.

Support on all of these issues can be accessed via Young Minds (www.youngminds.org.uk), Mind (www.mind.org.uk) and (for e-learning opportunities) Minded (www.minded.org.uk).

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
National Self-Harm Network: www.nshn.co.uk www.talktofrank.com/
Drug abuse
http://www.re-solv.org/ Solvent abuse

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

Books

Christopher Dowrick and Susan Martin (2015) *Can I tell you about Depression: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers Matthew Johnstone (2007) *I had a black dog.* Robinson, London

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

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

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.

Online support

Prevention of young suicide UK – PAPYRUS: www.papyrus-uk.org
On the edge: ChildLine spotlight report on suicide: www.nspcc.org.uk/preventing-abuse/researchand-resources/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 Multi-level 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
Eating Difficulties in Younger Children and when to worry: www.inourhands.com/eating-difficultiesin-younger-children

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