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**Positive Mental Health Policy**

**Tittensor First CE (VC) School**

**Last Updated: September 2022**

**Review date: September 2024**

**Defining mental health**

Mental Health is *“the emotional and spiritual resilience which enables us to enjoy life and survive*

*pain, suffering and disappointment. It is a positive sense of wellbeing and an underlying belief in our*

*and others dignity and worth. It is influenced by our experience and our genetic inheritance.”* (World

Health Organisation)

Mental health affects all aspects of life and behaviour.

Like physical health, mental health is something we all have. It can range across a spectrum from healthy to unwell; it can fluctuate on a daily basis and change over time.



**Context and Rationale**

Mental Health and Wellbeing promotes school success and improvements by:

* Promoting positive mental and emotional wellbeing by providing information and support.
* Creating a shared understanding of all aspects of mental health.
* Enabling those with mental health related issues to self-disclose and seek support in a safe

confidential manner.

* Offering guidance and strategies, along with the support of Mental Health First Aiders, to support pupils and staff to be mentally healthy.
* Creating a culture to support and maintain positive mental health and wellbeing.

**Aims of the policy**

The purpose of this policy is to have:

**General:**

Resilient, happier and more motivated pupils and staff who get more out of life, a learning community that withholds their core values and principles, encompassing the school motto, *‘Learning and growing together as we follow Christ.’*

In general, good mental health helps children:

* Learn and explore the world.
* Feel, express and manage a range of positive and negative emotions.
* Form and maintain good relationships with others.
* Cope with, and manage change and uncertainty.
* Develop and thrive.

**Teaching and Learning:**

* Pupils who are more engaged in the learning process and are willing to take a ‘risk’ and accept challenge.
* Pupils who can concentrate and engage with learning.
* Improved standards in a broad and balanced curriculum.
* Improved attainment.
* More effective teaching that is consistently good or better.
* Parents and carers who are more involved in school life and the learning process.

**Behaviour and Attendance:**

* Pupils with high self-esteem, confidence and resilience who are able to problem-solve and take risks.
* Pupils who have a voice in what happens in their learning.
* More engaged learners that are prepared for the future.
* Good concentration, behaviour and attendance.
* Positive peer relationships.

**Staff Confidence and Development:**

* High morale and positivity.
* Staff with a sound mental health and wellbeing leading to lower absenteeism.
* Stable, content and consistent workforce.
* Positive and effective relationships with pupils and colleagues.

**Policy statement**

Tittensor First School is committed to promoting the mental health and emotional wellbeing

of pupils and staff. In order to do so the school will:

**Promoting Mental Health and Wellbeing (Prevention):**

* Promote knowledge and understanding of both internal and external support services.
* Encourage and support the whole school community to be positive in its approach to mental health wellbeing.
* Provide guidance and support to all those connected with the organisation to help them develop confidence in their ability to manage mental health and emotional wellbeing.
* Provide appropriate training and information to staff on mental health and emotional wellbeing.
* Have named Mental Health First Aiders who are the contact point at Tittensor First and a Pastoral team who are responsible for co-ordination and delivery of the school’s mental health and emotional wellbeing strategy.
* Seek to embed mental health and emotional support across the curriculum.
* Keep this policy under review and make changes when legislation and best practice requires.

**Addressing Needs (mechanisms to support children and staff):**

* Promote a culture which supports and encourages self-disclosure.
* Use the ‘Mental Health Spectrum’ to identify children that fall into the ‘struggling’ and ‘unwell’ mental health categories and seek support from Assistant Head, G.Craig.
* Provide a framework for responding appropriately to mental health wellbeing.
* Recognise that staff have the responsibility to alert others to potential and actual indicators of mental health needs and to take this action whenever necessary. For pupils, through our Wellbeing referral support system following our Safeguarding Policy and for staff, via the Headteacher.
* Co-operate with other organisations involved in the delivery of mental health and emotional

support services.

* Observe the principles of confidentiality and general data protection in respect of mental health and emotional wellbeing.

**Lead Members of Staff**

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

* Gail Craig (Head teacher)- Designated Safeguarding Lead/RSE Lead/Mental Health First Aider
* Steph Peddie (Senior Teacher)-Designated Deputy Safeguarding Lead
* Vicky Larkin – Mental Health First Aider (Staff)

Any member of staff who is concerned about the mental health or wellbeing of a student should speak to the Headteacher or Wellbeing Support. If there is a fear that the student is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the Designated Safeguarding Lead or Designated Assistant Safeguarding Lead. Any other Safeguarding concerns that are non-urgent should be recorded using the Safeguarding Concern Sheet.

**Warning Signs of Poor Mental Health**

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 communicate their concerns to G. Craig or S.Peddie and a ‘Wellbeing Referral Form’ completed.

Possible warning signs include:

* 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
* Lowering of academic achievement
* Talking or joking about self-harm or suicide
* 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 secretively
* Repeated physical pain or nausea with no evident cause
* An increase in lateness or absenteeism

**Signposting**

We will ensure that staff, students and parents are aware of the support that we can offer as a school around mental health and wellbeing.

Following any concerns raised by a member of staff or a parent, a ‘Wellbeing Referral Form’ must be completed by the class teacher or parent and given to G. Craig or L. Mannering. Following this, staff that know the child well, will complete a Strengths and Difficulties Questionnaire or a Boxhall Profile to ascertain the unmet needs of the child.

A Wellbeing Passport will be devised for the child that outlines how the school can best support the child. Wellbeing and mental health interventions will then be tailored to meet these unmet needs. Following a 6 week block of interventions with the Wellbeing Support and classroom strategies put in place, a further Strengths and Difficulties Questionnaire or a Boxhall Profile will be complete to measure impact and progress and the Wellbeing Passport will be reviewed. If the impact is positive and progress towards the Wellbeing Passport is positive, the child can continue to be supported in the classroom and the child will be monitored. However, if the impact and progress towards the Wellbeing Passport is not deemed satisfactory and the child continues to display unmet needs, further interventions will be offered to the child and the process repeated.

In the event of limited impact and progress after two cycles of interventions, the school will refer the child to the appropriate outside agency e.g. Dove or to CAMHS.

If a child gives us reason to believe that there may be underlying child protection issues the Designated Safeguarding Lead or Deputies must be informed immediately and the school’s safeguarding procedures must be adhered to.

**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 monthly Wellbeing Newsletter
* Ensure that all parents are aware of who to talk to if they have concerns about their child
* Make our mental health and wellbeing policy easily accessible to parents
* Share ideas about how parents can support positive mental health in their children through our regular parent drop-ins and workshops
* Keep parents informed about the mental health topics their children are learning about in RSE and share ideas for extending and exploring this learning at home

**Training**

All staff will receive regular training about recognising and responding to mental health issues throughout the year through Professional Development meetings and INSET day training. Any staff requiring further professional development should make their suggestions to G. Craig, our CPD Coordinator, who can also highlight sources of relevant training and support for individuals as needed.