

The Mental Health and Well-Being of our Pupils/Learners Policy

Purpose:

This policy describes our approach to promoting the positive mental health and wellbeing of our pupils/learners.

Our **Ambitious Approach** underpins all our thinking and practice. It is an approach to education created by Ambitious about Autism to support children and young people with autism. It has been developed to provide high-quality education whilst affording dignity, respect, and compassion, in all aspects of our provision, including the consideration of mental health and wellbeing. The Ambitious

Approach is based upon a person's indisputable rights to be:

- treated with dignity and compassion
- valued
- listened to
- supported to have the best quality of life possible
- empowered to make choices and decide on how they want to live their life.

In promoting positive mental health and wellbeing we use both universal, whole school/college approaches (Tier 1) and approaches aimed at those pupils/learners needing more targeted and specialised support (Tiers 2 and 3).

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. By developing and implementing practical, relevant, and effective mental health policies and procedures we can promote a safe and stable environment for pupils/learners affected, both directly and indirectly, by mental ill health.

Our schools and college are already 'thought leaders' in this area of work. The Rise School was awarded the Gold Standard Carnegie Mental Health Award. Ambitious College won the 2020 Natspec National Award for Mental Health and Wellbeing and TreeHouse School has a Silver Award as a UNICEF Rights Respecting School.

What is mental health?

Mental health can be defined as feeling good, feeling that life is going well, and feeling able to get on with daily life. When we have good mental health, we still experience negative and painful emotions such as grief, loss and failure – these are a normal part of life that we can successfully navigate when we have good mental health.

It can be helpful to understand mental health as being made up of two key elements:

- Feeling good - experiencing positive emotions like happiness, contentment and enjoyment and feelings like curiosity, engagement, and safety.
- Functioning well - coping with the normal stressors of life, having a sense of purpose and experiencing positive relationships and social connections

At its simplest, mental illness is the absence of mental health.

What is mental illness?

Mental illness, like physical illness, can range from having a few mild symptoms and feeling a bit 'under the weather' to being seriously ill. Mental illness is usually classified as mild, moderate or severe and is characterised by a combination of abnormal emotions, thoughts, behaviours and relationships with others.

These problems can be worsened for those with greater support needs, particularly if they are unable to communicate about their feelings or communicate their distress.

Most mental illnesses can be successfully treated by self-management, talking therapies and/or medication.

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Autism and mental health:

People with autism are at much higher risk of developing a mental health problem than the general population. 70% children and young people with autism will have a mental health concern at some point in their life and 40% will have two or more. This is reflected in the use of Child and Adolescent Mental Health Services, with 1 in 10 of the children and young people who use CAMHS having autism.

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

- Adult at Risk Safeguarding Policy
- Adult at Risk Safeguarding Procedure
- Child Protection Policy and Procedure
- Health Care Policy
- Physical Intervention Policy
- Anti Bullying Policy

Scope:

Whilst all staff have a responsibility to promote the mental health of pupils/learners there are senior leaders in each of our settings who have a specific remit in this area. They are:

- Sean Egan, Assistant Head of School (PWDB), TreeHouse School
- Hannah Clements, Assistant Head of School, (Pastoral), The Rise School
- Jacqui Steel, Assistant Head of College, (PWDB), Ambitious College

Any member of staff who is concerned about the mental health or wellbeing of a learner/pupil should speak to the mental health lead in the first instance. If there is a fear that the learner/pupil is in danger of immediate harm then the normal child/adult protection procedures should be followed with an immediate referral to the designated safeguarding lead (DSL) or Head of School/College.

If the learner/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 CAMHS is appropriate, this will be led and managed by the lead professional in the Transdisciplinary Team supporting the young person.

Behaviour Support Plans:

Most of our pupils/learners have Behaviour Support Plans in place. Behaviour Support Plans set out the bespoke behavioural support that is in place for the child/young person, including any support for a known mental health condition.

Administration of medication:

If a pupil/learner is taking medication to support a mental health condition this will be set out in their Medical Health Support Plan and if applicable in their Administration of Medication Support Plan. Please refer to the Health Care Policy for guidance.

Tiers of support:

Tier 1 support is universal. That is, it is offered to all pupils/learners including mental health and well being support. Support at Tier 2 and 3 might focus more on specific interventions such as 1:1 support for mental health and well being, art/music therapy etc.

Teaching about Mental Health:

The skills, knowledge and understanding needed by our learner/pupils to keep themselves and others physically and mentally healthy and safe are included as part of the PSHE/Social curriculum offered in each of our schools and college.

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

We will ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

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Signposting:

We will ensure that staff, learner/pupils and parents are aware of sources of support within school and college and in the local community. This includes access and referral to our Learner and Family Support Team. We will actively work in partnership with social care and health to ensure there is transdisciplinary working and contribute openly and transparently to cross agency working.

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

Warning signs:

School/College staff may become aware of warning signs which indicate a learner/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 communicate their concerns with the mental health lead for their setting. Possible warning signs include:

- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating or sleeping habits
- New or increasing behaviours of distress
- 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

Managing Disclosures:

A learner/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 learner/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 learner/pupil's emotional and physical safety rather than of exploring 'Why?'

All disclosures should be recorded in BehaviourWatch and 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 named mental health lead who will store the record appropriately and offer support and advice about next steps.

Confidentiality:

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We are honest about the issue of confidentiality. If it is necessary for us to pass our concerns about a learner/pupil on, then we should discuss with the learner/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 learner/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/carer e.g. 'learner/pupils up to the age of 16 who are in danger of harm'.

It is always advisable to share disclosures with a colleague, usually the mental health lead. This helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the learner/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 learner/pupil and discuss with them who it would be most appropriate and helpful to share this information with.

If a child gives us reason to believe that there may be underlying child/vulnerable adult protection issues, parents should not be informed, but the designated safeguarding lead must be informed immediately.

Working with parents/carers:

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

It can be shocking and upsetting for parents/carers to learn of their child's/young person'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/carer 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/carers can also be helpful too, e.g. parent/carer 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/carers 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/young person's confidential record.

Parents/carers are often very welcoming of support and information from the school/college about supporting their child's/young person's emotional and mental health. In order to support parents/carers we will:

- Highlight sources of information and support about common mental health issues
- Ensure that they are aware of who to talk to, and how to go about this, if they have concerns about their own child/young person or a friend of their child/young person
- Make our mental health policy easily accessible to parents/carers
- Share ideas about how parents/carers can support positive mental health in their child/young person

Supporting Peers:

When a learner/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.

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Support will be provided either in one to one or group settings and will be guided by conversations with the learner/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

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 learner/pupils 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 learner/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 the mental health lead who can also highlight sources of relevant training and support for individuals as needed.

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