

Cavendish Close Infant and Nursery School

Mental Health and Emotional Wellbeing Policy

Contents

- 1.0 Policy Statement
- 2.0 Scope
- 3.0 Policy Aims
- 4.0 Key Staff Members
- 5.0 SEN Support Plans
- 6.0 Teaching about Mental Health
- 7.0 Signposting
- 8.0 Sources of support at school and in the local community
- 9.0 Warning signs
- 10.0 Targeted support
- 11.0 Managing disclosures
- 12.0 Confidentiality
- 13.0 Whole School Approach
 - 13.1 Working with Parents/Carers
 - 13.2 Supporting Parents/Carers
- 14.0 Support Peers
- 15.0 Training
- 16.0 Policy Review

1.0 Policy statement

At *Cavendish Close Infant and Nursery school*, we are committed to promoting positive mental health and emotional wellbeing to all children, their families, members of staff and governors. Our open culture allows children's voices to be heard, and through the use of effective policies and procedures we ensure a safe and supportive environment for all affected - both directly and indirectly - by mental health issues.

Our vision as a school is to teach our children about how to make safe, happy and healthy choices now, and in their future lives.

2.0 Scope

This policy is a guide to all staff – including non-teaching and governors – outlining Cavendish Close Infant and Nursery Schools approach to promoting mental health and emotional wellbeing.

It should be read in conjunction with other relevant school policies.

3.0 Policy Aims

- Promote positive mental health and emotional wellbeing in all staff and children.
- Increase understanding and awareness of common mental health issues.
- Enable staff to identify and respond to early warning signs of mental ill health in themselves and children.
- Enable staff to understand how and when to access support when working with young children who have mental health issues.
- Provide the right support to children with mental health issues, and know where to signpost them and their parents/carers for specific support.
- Develop resilience amongst children and raise awareness of resilience building techniques through daily teaching during 'time for us' and 'together time'.
- Raise awareness amongst staff and gain recognition from SLT that staff may have mental health issues, and that they are supported in relation to looking after their wellbeing; instilling a culture of staff and pupil welfare where everyone is aware of signs and symptoms with effective signposting underpinned by behaviour and welfare around school.

4.0 Key staff members

This policy aims to ensure all staff take responsibility to promote the mental health of children, however key members of staff have specific roles to play:

- Safeguarding Team Mrs J Leadbeater and Mrs R Dearie
- Designated Safeguarding Leads Mrs C Diffin, Headteacher, Mrs C Howett Deputy

Headteacher and Mrs N Asghar Assistant
Deputy Headteacher

▪ Mental Health Champion and Personal
Development Leader Mrs A Orme

- Inclusion Lead Mrs R Vincett

If a member of staff is concerned about the mental health or wellbeing of a child, in the first instance they should speak to the Inclusion Leader or the Personal Development Leader.

If there is a concern that the child is high risk or in danger of immediate harm, the school's child protection procedures should be followed by the school safeguarding team.

If the child presents a high risk medical emergency, relevant procedures should be followed, including involving the emergency services if necessary.

5.0 SEN Support Plans

When a child has been identified as having cause for concern, has received a diagnosis of a mental health issue, or is receiving support either through CAMHS or another organisation, it is recommended that an SEN Support Plan should be drawn up. The development of the plan should involve the pupil, parents, and relevant professionals.

Suggested elements of this plan include:

- Details of the pupil's situation/condition/diagnosis
- Special requirements or strategies, and necessary precautions
- Medication and any side effects
- Who to contact in an emergency
- The role the school and specific staff have
- Boxall Profile Assessment undertaken where necessary
- The 'Helping Hand Strategy' (where 5 members of staff that are closest to the child are identified and available to meet all of the child's needs)

6.0 Teaching about mental health

The skills, knowledge and understanding our children need to keep themselves - and others - physically and mentally healthy and safe are included as part of our Relationship and Health Education Curriculum and our peer mentoring programme.

Our RHE curriculum at all stages is a good opportunity to promote children's wellbeing through the development of healthy coping strategies and an understanding of the child's own emotions as well as those of other people. We approach this self-regulation education through our 'Mood Monsters'.

Additionally, we will use such lessons as a vehicle for providing children who do develop difficulties with strategies to keep themselves healthy and safe, as well as supporting children to support any of their friends who are facing challenges. **See Section 14 for Supporting Peers. Specific nurture children are targeted by individual needs.**

7.0 Signposting

We will ensure that staff, children and parents/carers are aware of the support and services available to them, and how they can access these services.

8.0 Sources or support at school and in the local community

School Based Support -

- 'Together Time' for nurture children'; a group that explores social and emotional wellbeing for vulnerable children
- Lunchtime Nurture Group; a group that is run for children who have social and emotional problems on the playground
- Lego Therapy; for children with social and emotional needs.
- Class Calm Areas/ safe spaces
- 'Mood Monsters' displays, resources and vocabulary for self-regulation

Local Support

- CAMHS; Child and adolescent mental health services.

- Build Sound Minds (Derby and Derbyshire, Action for Children) Early intervention for children’s emotional and mental wellbeing.
- NSPCC
- Schools’ Educational Psychologist
- School Nurse
- Early Help Assessment

9.0 Warning Signs

Staff may become aware of warning signs which indicate a child 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 alert the Inclusion Leader, the Personal Development Leader and the Safeguarding Team.

Possible warning signs, which all staff should be aware of include:

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| ▪ Physical signs of harm that are repeated or appear non-accidental | ▪ Expressing feelings of failure, uselessness or loss of hope |
| ▪ Changes in eating / sleeping habits | ▪ Changes in clothing – e.g. long sleeves in warm weather |
| ▪ Increased isolation from friends or family, becoming socially withdrawn | ▪ Secretive behaviour |
| ▪ Changes in activity and mood | ▪ Avoiding PE or getting changed secretly |
| ▪ Lowering of academic achievement | ▪ Lateness to, or absence from school |
| ▪ Talking or joking about self-harm or suicide | ▪ Repeated physical pain or nausea with no evident cause |
| ▪ Abusing drugs or alcohol | ▪ An increase in lateness or absenteeism |

10.0 Targeted support

We recognise some children and young people are at greater risk of experiencing poorer mental health. For example, those who are in care, young carers, those who have had previous access to CAMHS, those living with parents/carers with a mental illness and those living in households experiencing domestic violence.

We work closely with outside agencies and their teams in supporting the emotional and mental health needs of school-aged children and are equipped to work at community, family and individual levels. Their skills cover identifying issues early, determining potential risks and providing early intervention to prevent issues escalating.

We ensure timely and effective identification of children who would benefit from targeted support and ensure appropriate referral to support services by:

- Providing specific help for those children most at risk (or already showing signs) of social, emotional, and behavioural difficulties;
- Working closely with outside agencies to follow various protocols including assessment and referral; referral;
- Identifying and assessing in line with the Early Help Assessment Tool (EHAT), children who are showing early signs of anxiety, emotional distress, or behavioural difficulties;
- Discussing options for tackling these issues with the child and their parents/carers. Agree an SEN Support Plan as the first stage of a 'stepped care' approach;
- Providing a range of interventions that have been proven to be effective, According to the child's needs;
- Ensure children have access to pastoral care and support, as well as specialist services, so that emotional, social and behavioural difficulties can be dealt with as soon as they occur;
- Provide children with clear and consistent information about the opportunities available for them to discuss personal issues and emotional concerns. Any support offered should take account of local community and education policies and protocols regarding confidentiality;
- Provide children with opportunities to build relationships, particularly those who may find it difficult to seek support when they need it; and
- The identification, assessment, and support of young carers under the statutory duties outlined in the Children & Families Act 2014.

11.0 Managing disclosures

If a child chooses to disclose concerns about themselves, or a friend, to any member of staff, the response will be calm, supportive and non-judgemental.

All disclosures should be recorded confidentially on the child's personal file, including:

- Date
- Name of member of staff to whom the disclosure was made
- Nature of the disclosure & main points from the conversation
- Agreed next steps

This information will be shared with the *Safeguarding team*.

12.0 Confidentiality

If a member of staff feels it is necessary to pass on concerns about a child to either someone within or outside of the school, then this will be first discussed with the child. We will tell them:

- Who we are going to tell
- What we are going to tell them
- Why we need to tell them
- When we're going to tell them

Ideally, consent should be gained from the child first, however, there may be instances when information must be shared, such as children up to the age of 16 who are in danger of harm.

It is important to also safeguard staff emotional wellbeing. Information will therefore be shared within the safeguarding team. This ensures one single member of staff isn't solely responsible for the child. This also ensures continuity of care should staff absence occur and provides opportunities for ideas and support.

13.0 Whole school approach

13.1 Working with parents/carers

We are mindful that for a parent, hearing about their child's issues can be upsetting and distressing. They may therefore respond in various ways which we should be prepared for and allow time for the parent to reflect and come to terms with the situation.

Signposting parents to other sources of information and support can be helpful in these instances. At the end of the meeting, lines of communication should be kept open should the parents have further questions or concerns. Booking a follow-up meeting or phone call might be beneficial at this stage.

Ensure a record of the meeting and points discussed/agree are recorded.

13.2 Supporting parents

We recognise the family plays a key role in influencing children and young people's emotional health and wellbeing; we will work in partnership with parents and carers to promote emotional health and wellbeing by:

- Ensuring all parents are aware of and have access to promoting social and emotional wellbeing and preventing mental health difficulties;
- Highlighting sources of information and support about common mental health issues through our communication channels (website, newsletters etc.);
- Offering support to help parents or carers develop their parenting skills.
- Ensuring parents, carers and other family members living in disadvantaged circumstances are given the support they need to participate fully in activities to promote social and emotional wellbeing.
- To recognise any parent/carer who may have mental health difficulties themselves, and to advise them of outside agencies that can offer them support.

14.0 Supporting Peers

When a child is suffering from mental health issues, it can be a difficult time for their friends who may want to support but do not know how. To keep peers safe, we will consider on a case by case basis which friends may need additional support. Support will be provided in one to one or group settings and will be guided by conversations by the child 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 / saying which may inadvertently cause upset
- Warning signs that their friend needs help (e.g. signs of relapse)

15.0 Training

As a minimum, all staff will receive regular updates about recognising and responding to mental health issues as part of their regular child protection training to enable them to keep children safe. A nominated member of staff will receive professional Mental Health training to become a Designated Senior Mental Health Leader- Mrs A Orme.

We will display relevant information in the staffroom for staff who wish to learn more about mental health. The MindEd learning portal provides free online training suitable for staff wishing to know more about a specific issue.

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 to developing situations with our children.

16.0 Policy Review

This policy will be reviewed every two years as a minimum. The next review date is November 2022. In between updates, the policy will be updated when necessary to reflect local and national changes. This is the responsibility of the Personal Development Leader (Mrs A Orme).

Any personnel changes will be implemented immediately.

This policy has been approved by the Headteacher- Mrs C Diffin.