



The Federation of Boskenwyn & Germoe Schools

Mental Health and Wellbeing Policy



Named Mental Health Lead: Angie Larcombe

Named Governor with lead on Mental Health and Wellbeing: TBC

Why Mental Health and Wellbeing are important

In the Federation of Boskenwyn and Germoe Schools, we aim to promote positive mental health and wellbeing for our whole school community (children, staff, parents and carers), and recognise how important mental health and emotional wellbeing is to our lives in just the same way as physical health. We recognise that children's mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. All children go through ups and downs during their school career and some face significant life events:

In 2021:

- One in eight children aged between 5 and 19 has at least one diagnostic mental health problem.
- Less than 35% of children with mental health problems get any help.
- Around 60% of children in care are reported to have an emotional or health problem.
- Young people who identify as LGBTQ+ are two-and-a-half times more likely to report a mental health problems than those who identify as heterosexual.
- (Data from the Anna Freud Centre)

Mental Health needs can have an enormous impact on quality of life, relationships and academic achievements. In many cases it is life-limiting.

The Department for Education (DFE) recognises that,

'..in order to help their children succeed; schools have a role to play in supporting them to be resilient and mentally healthy'

Schools can be a place for children and young people to experience a supportive and nurturing environment that has potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience. For some, school will be a place of respite from difficult home lives and offer positive role models and relationships, which are critical in promoting children's wellbeing and can help engender a sense of belonging and community.

Our role in school is to ensure children are able to manage times of changed and stress, and that they are supported to reach their potential or access help when they need it. We also have a role to ensure that children learn about what they can do to maintain positive mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues, and where they can go if they need help and support.

Our aim is to help support and develop protective factors which build resilience to mental health problems and to be schools where:

- Relationship underpins all we do
- Behaviour is seen as a communication of need
- All children are valued
- Children have a sense of belonging and feel safe
- Children feel able and are given opportunity to talk openly with trusted adults about their problems and worries without feeling any stigma
- Positive mental health is promoted and valued
- Bullying is not tolerated

In addition to children's wellbeing, we recognise the importance of promoting staff mental health and wellbeing. None of us are able to support the emotional needs of others if we are not ourselves, supported to maintain good mental health and wellbeing.

Purpose of the policy

This policy sets out:

- How we promote positive mental health
- How we prevent mental health problems
- How we identify and support children with mental health needs
- How we train and support all staff to understand mental health issues and spot early warning signs to help prevent or address difficulty
- Key information about some common mental health problems
- Where parents, staff and children can get further advice and support
- To support awareness of links between Mental Health Difficulty and Safeguarding concerns

Definition of Mental Health and Wellbeing

The World Health Organisation defines mental health and wellbeing as,

"Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, [and mental health,] a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community"

Mental health and wellbeing is not just the absence of mental health problems. We want all children and young people to:

- Feel confident in themselves
- Be able to express a range of emotions appropriately
- Be able to make and maintain positive relationships with others
- Cope with the stresses of everyday life
- Manage times of stress and be able to deal with change
- Learn and achieve

How the policy was developed:

The development of this policy was initiated by our SENCo/Senior Mental Health Lead to reflect development of our core values around mental health and wellbeing, to detail needs, our Offer, and inform direction and development for the future.

In developing this policy we have taken account of:

- Promoting children and young people's mental health and wellbeing: A whole school or college approach, (2021) HM Government, Children & young People's Mental Health Coalition
- Mental Health and Behaviour in Schools, guidance November 2018
- Keeping Children Safe in Education 2021
- The Anna Freud Centre – 5 steps to mental health and wellbeing, <https://www.annafreud.org/>
- Tinson Review of School Exclusion, (2019), DFE
- Special Needs and Disabilities Code of Practice 0:25 years, (2014), DFE

Links to other policies

This policy links to many of our policies on Safeguarding, Medical Needs, SEN, Equality, Looked after children and Anti-bullying and others, as implications for mental health relate to all. Links with the school's Relational and Behaviour Policy are especially important because behaviour, whether it is disruptive, withdrawn, anxious, depressed or presents in other ways, may be related to an unmet mental health need.

Also see 'A Journey into Relationship'

A whole school approach to promoting positive mental health

We take a whole school approach to promoting positive mental health that aims to help children become more resilient, happy and successful and to prevent problems before they arise.

Our approach consists of five areas of focus:

Leading change

– creating an ethos, policies, and behaviours that support mental health and resilience that everyone can understand

Working together

– Mental health is everyone's responsibility – effective working with children, parents, carers, staff, community and specialist support

Understanding need

– Early identification of children who have mental health needs and planning support to meet their needs, including working with specialist services

Promoting wellbeing

– Helping children to develop social relationships, support each other and seek help when they need it; Helping children to be resilient learners; teaching children social and emotional skills and an awareness of mental health

Supporting staff

– training and support to develop their skills, understanding and own resilience

We aim to create an open and positive culture that encourages discussion and understanding of mental health issues, to minimise the impact of stigma and counter misunderstanding.

Staff roles and responsibilities, including those with specific responsibilities

All staff have a responsibility to promote positive mental health, and to understand about protective and risk factors for mental health and wellbeing. We are a Trauma Informed staff and understand some children will require additional help - all staff have the skills to look out for early warning signs, ensuring that difficulty can be addressed with speed, and children get early intervention and the support they need.

All staff understand possible risk factors that might make some children more likely to experience difficulty, such as physical long-term illness of themselves or a family member, having a parent who has a mental health problem, bereavement, family break down, addiction etc. Staff also understand how Protective factors counter and protect children from adversity, such as self-esteem, communication and problem solving skills, a sense of worth and belonging and emotional literacy. See Appendix 1 on Risk and Protective Factors

Our Senior Mental Health Leads:

- Work with other staff to coordinate whole school activities and initiatives to promote positive mental health and wellbeing
- Provide advice and support for staff and contribute to training/staff meeting
- Oversee and signpost to avenues of help and provision
- Promote awareness of the importance of mental health and wellbeing in our school community
- Coordinate and contribute to the whole school direction and offer for mental health

Collaborative in-school support:

- Senior leadership team
- SENCo
- Safeguarding team
- Teachers
- TAs
- Support staff
- Governors

We recognise that many behaviours and emotional problems can be supported within our school, or with advice from external professionals. Some children will need more intensive support at times, and school will draw on a range of mental health professionals and organisations that provide support to children and families with mental health needs.

In school support

The range of strategies we are using:

Pupil-led Activities

- School parliament
- Inquiry based learning choice
- Treat choices
- Input for change in school eg loos, playground
- Playground Buddy and buddy benches
- Trips and visits
- Quiet areas

Transitional programmes

- Transition to secondary school for all Y6
- Enhanced transition for children with additional needs, including children with ASD

Class activities

- Worry box
- Circle times
- RSE, PSHE
- Class story that relates to aspect of emotional literacy
- Debate and discussion
- Go noodle/cosmic yoga and similar built into school day
- Brain, movement and sensory breaks
- Games
- Visual ways of showing mood/feeling

Whole school

- Mental Health protocol to support staff in meeting need
- Trauma Informed School approach
- 'tool kits' on website and staff google drive for mental health and wellbeing, bereavement support for eg.
- Mental health and wellbeing slots in staff meeting
- Staff flexi days and some capacity for one-off flexible working
- Close working with parent association to support belonging and wellbeing eg Christmas fair
- High quality teaching
- Metacognition, building learning power and growth mindset approaches
- Breakfast club and after school care
- After school clubs
- Trips, visits, camps
- Opportunity to ski, surf, swim, sail
- Cultural events
- Autism Champion
- Senior Mental Health Leads in school
- School linked Primary Mental Health Practitioners

Targeted Small group activities/1:1

- Talk sessions
- Nurture
- Cognitive Behaviour Therapy based programmes
- Social skills
- Emotional literacy and regulation
- Drawing and Talking
- Coaching
- Bereavement sessions

Parents

- Support and planning meetings
- Support at point of need/open door
- Signposting eg Supporting Parents and Children Emotionally
- Wellbeing book box for borrowing

Through our whole school approach to mental health and wellbeing, our PHSE and RSE curriculum and targeted provision, children develop *Emotional Literacy* and *Emotional Resilience*:

EYFS/KS1

- To recognise, name and describe feelings including good and not so good feelings
- Simple strategies for managing feelings
- How their behaviour affects others
- About empathy and understanding other people's feelings
- To cooperate and problem solve
- To motivate themselves and persevere
- How to calm down
- About change and loss and the associated feelings (including moving home, losing toys, pets or friends)
- Who to go to if they are worried
- About different types of teasing and bullying, that these are wrong and unacceptable
- How to resist teasing or bullying, if they experience or witness it, whom to go to and how to get help

KS2

- What positively and negatively affects their mental and emotional health (including the media)
- Positive and healthy coping strategies
- About good and not so good feelings
- To describe the range of intensity of their feelings to others
- To recognise and respond appropriately to a wide range of feelings in others
- To recognise that they may experience conflicting emotions and when they might need to listen to their emotions to overcome them
- That they may need to seek adult support to support them at times
- About resilience
- How to motivate themselves and bounce back if they fail at something
- How to empathise and be supportive of others
- About change, including transitions (between key stages and schools), loss, separation, divorce and bereavement
- About the consequences of discrimination, teasing, bullying and aggressive behaviours (including online bullying, prejudice-based language), as well as how to respond and ask for help if they are victims of this themselves
- About the importance of talking to someone and how to get help

Identifying, referring and supporting children with mental health needs

Our approach:

- Provide a safe environment to enable children to express themselves and be listened to
- Ensure the welfare and safety of the children are paramount
- Identify appropriate support for children based on their needs
- Involve parents and carers when their child needs support
- Involve children in the care and support they have
- Monitor, review and evaluate the support with children and keep parents and carers updated

Early Identification

Close working relationships and understanding of individual need, mean we are best placed to see when things aren't good with the children. We aim to identify difficulty as early as possible, to prevent things worsening. We use:

- Strength and Difficulties Questionnaires
- Analysis of attendance percentages and patterns
- Boxall profile
- Leuven scale in our early years and school adapted scale for older children
- Worry box 'entries'
- 'I wish my teacher knew'
- Pupil progress
- SEN APDR cycle meetings
- Staff contact/staff meetings
- Discussion with children
- Discussion with parents
- Contextual information
- Information from other sources – previous school
- Opportunity for children to share/speak
- Relational contexts - change in behaviour, presentation, engagement etc
- Observations

Signs of difficulty

- Changes in behaviour, presentation, engagement, demeanour, eating, sleeping habits
- Isolation from friends or family and becoming socially withdrawn
- Falling academic achievement
- Talking or joking about self-harm or suicide
- Expressing feelings of failure, uselessness or loss of hope
- Secretive behaviour
- An increase in lateness or absenteeism
- Not wanting to do PE or get changed for PE
- Wearing long sleeves in hot weather
- Drugs or alcohol misuse
- Physical signs of harm that are repeated or appear non-accidental
- Repeated physical pain or nausea with no evident cause/complains of feeling ill

Staff are aware that mental health needs, such as anxiety, might appear as non-compliant, disruptive or aggressive behaviour which could relate to difficulties with attention, hyperactivity, sensory or neurodevelopmental difference. Difficulty may relate to home problems, difficulties with learning, peer relationships or development, or a mixture of causes. Staff therefore, focus on unpicking the behaviour, digging below what's seen outwardly to provide the best support. Our understanding that behaviour communicates a need, necessitates identifying the functional purpose of the behaviour, in order to support the child with positive behaviours, thoughts and feelings in relation to the identified area of difficulty.

Safeguarding procedures will always be followed if a child is considered at risk of immediate harm

Disclosures by children and confidentiality

In supporting children with poor mental health and wellbeing, it is possible, disclosure may be made. The emotional and physical safety of the child is paramount and staff listen, making it clear to the child that they will share the concern in order to provide appropriate support. Safeguarding procedures will be followed.

Assessment, Interventions and Support

See Mental Health and Wellbeing Protocols

All concerns are discussed with the Senior Mental Health Lead and SENDCo. Discussions with school staff, parents and child are likely to result in a plan of action to support the child, based on level of need and type of support needed:

| Need | Evidence-based Intervention and support | Monitoring |
|--|---|---|
| <p>Level of need is identified in discussion with key members of staff, parents and child</p> <p>High level (requiring school referral)</p> | <p>Possible Interventions and support provided will be decided in consultation with key members of staff, parents and child</p> <p>CAMHs assessment 1:1 or family/group support Early Help Hub referral pathways External agency support Life story work PLAC/CiC support</p> | <p>All children needing targeted or individualised support will have an Individual Provision Map setting out</p> <ul style="list-style-type: none"> • Needs • How the pupil will be supported • Actions to provide that support • Any special requirements <p>The plan will be reviewed at least termly, and children and parents will be involved.</p> |
| <p>Medium level (requiring school referral)</p> | <p>Access to in school provision – Nurture Small group Social skills group CBT groups Therapy based approaches Circle of friends Emotional literacy/regulation</p> <p>Some Early Help Hub referral pathways Family support worker Education Mental Health Practitioner Educational Psychologist</p> | <p>Pre and post assessment will be completed to allow evaluation of impact and next steps for each intervention.</p> <p>Children requiring medium to high level support will be on the school's SEN Record of Need</p> |
| <p>Low level</p> | <p>General support Class teacher/TA SENCo drop in Circle time/PSHE</p> | |

SEND and mental health

Persistent mental health problems may lead to children having significantly greater difficulty in learning than the majority of those of the same age. In some cases, the child may benefit from being identified as having a special educational need (SEN).

Some children with SEND may also be more susceptible to mental health difficulty as a result of the challenge of their other needs.

The impact of mental health and wellbeing on the individual as a learner cannot be overstated. Staff strive to meet the needs of the child in the round.

Involvement of parents and carers

Promoting mental health

We recognise the important role parents and carers have in promoting and supporting the mental health and wellbeing of their children, and in particular supporting children who do have mental health needs.

On joining our schools, parents are asked, if they feel able, to share the unknown life history of their child, along with any adverse childhood experiences they have lived through. It is very helpful if families feel able to share information with school, so that we can better support their child from the outset. All information is treated in confidence.

To support parents and carers:

- We provide information on our websites on mental health issues, including toolkits
- Regular notification is circulated regarding parent support
- Support of parents at point of need, where possible
- Intervention for parents 'Supporting Parents and Children Emotionally' is signposted
- Support in seeking onward referral for assessment and provision

Involving children

In addition to children's involvement in meetings for review of the Assess, Plan, Do, Review cycle with parents and teachers, and parents' evenings, children are encouraged to share their views and feelings when difficulty arise. Children are actively encouraged to consider people who they feel comfortable speaking with, even if it's not adults in their class. It is important children feel able to speak and that potential obstacles are minimised.

Children's views are sought around curriculum and enrichment planning, clubs, class and school rules, as well as via school parliament.

Surveys are sent to children to seek their opinions around learning and subject leads speak with children about their likes and dislikes. Children's voices are sought in other areas of school life, such as the lunch menu.

Our curriculum encourages discussion through debate and collaborative working, and generally fosters a positive environment for children to use their voice, become confident and develop assertiveness with respect. Mental Health and Well-being are particularly explicitly supported within our circle time, RSE and PSHE activities, but child voice is inherent to all we do.

Supporting and Training Staff

We want all staff to be confident in their knowledge of mental health and wellbeing and to be able to promote positive mental health and wellbeing, to be able to identify mental health needs early in children, and know what to do and where to get help.

It is important therefore, that adults recognise their own needs. Supporting and promoting the mental health and wellbeing of staff is an essential component of a healthy school and we promote opportunities to maintain a healthy work life balance and wellbeing:

- Staff have the opportunity to attend social events
- Birthdays are celebrated
- We offer free child care for staff
- Opportunities to be involved in educational trips
- A day's flexi time for extended commitments eg camp
- Opportunity to follow areas of personal interest in cpd are supported where possible
- Staff meetings are open and inclusive for all staff
- Adults work in supportive class and key stage teams
- Safeguarding training
- Wellbeing focus in staff meeting

Staff have had training in Trauma, and some have had training in Emotional First Aid and other courses that enhance understanding of mental health and wellbeing, and how these impact on learning and capacity of a child to thrive.

Our Mental Health Lead at Boskenwyn is a Trauma Informed School Practitioner and has training in different areas of mental health and wellbeing for school as part of her SEN and Safeguarding responsibilities. Both schools are training currently to enable a Senior Mental Health Lead to be operational in each school. Designated staff are mentors for staff, as detailed in the Staff Wellbeing Policy and will support whether a school based or personal difficulty.

Monitoring and Evaluation

This mental health and wellbeing policy has been drawn up along side development of the Senior Mental Health Lead roles during 2021/22 and is reflective of the provision that we have been building for the past five years or so.

This policy will be monitored at an annual review meeting led by the Mental Health Leads in both schools.

Date: 5th December 2023

Date of Review: September 2025

Appendices

Appendix 1: Protective and Risk Factors

| | Risk Factors | Protective Factors |
|-------------------------|---|---|
| In the Child | <p>Genetic influences Specific developmental delay Communication difficulties Physical illness Academic difficulty Low self-esteem SEND</p> | <p>Being female (in younger children) Secure Attachment experience Outgoing temperament as an infant Good communication skills, sociability Being a planner and having a belief in control Humour Problem solving skills, positive attitude Experiences of success and achievement Faith or spirituality Capacity to reflect, resilience</p> |
| In the Family | <p>Overt parental conflict including Domestic Abuse Family breakdown (including where children are taken into care or adopted) Inconsistent or unclear boundaries Hostile and rejecting relationships Failure to adapt to a child's changing needs Physical, sexual, emotional abuse or neglect Parental psychiatric illness Parental criminality, alcoholism or personality disorder Death and loss – including loss of friendship</p> | <p>At least one good parent-child relationship (or one supportive adult) Affection Clear, consistent boundaries Support for education Supportive long term relationship or the absence of severe discord</p> |
| In the School | <p>Bullying Discrimination Breakdown or lack of positive friendships Negative peer influences Peer pressure Poor pupil to teacher relationship</p> | <p>Clear policies on relationships and bullying 'Open door' policy for children to raise problems A whole-school- approach to promoting good mental health and wellbeing Positive classroom management A sense of belonging Positive peer influences</p> |
| In the Community | <p>Socio-economic disadvantage Homelessness Disaster, accidents, war or other overwhelming events Discrimination Other significant life events</p> | <p>Wider supportive network Good housing High standard of living High morale school with positive policies for behaviour, attitudes and anti-bullying Opportunities for valued social roles Range of sport/leisure activities</p> |

Appendix 2: Specific mental health needs most commonly seen in school age children:

For information see Annex C Main Types of Mental Health Needs

Mental Health and Behaviour in School DfE March 2016

<http://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2>

Annex C includes definitions, signs and symptoms and suggested interventions for

- Anxiety (including panic attacks, phobias and Obsessive Compulsive Disorder OCD)
- Depression
- Eating Disorders
- Substance Misuse
- Self Harm

Appendix 3 Where to get Information and Support

For general information and support:

www.annafreud.org.uk (support for parents and school)

www.place2be.org.uk (support for young people)

www.yoingminds.org.uk (champions young people's mental health and wellbeing)

www.mind.org.uk (advice and support on mental health problems)

www.minded.org.uk (e learning)

www.time-to-change.org.uk (tackles the stigma of mental health)

www.rethin.org (challenges attitudes towards mental health)

For specific areas of Mental Health:

www.anxietyuk.org.uk (anxiety)

www.ocduk.org (OCD)

www.depressionalliance.org (depression)

www.b-eat.co.uk and www.inourhands.com (eating disorders)

www.nshn.co.uk (self harm)

www.papyrus-uk.org (suicidal thoughts and prevention of young suicide)