



Date of review: September 2021

Date of next review: April 2023

Responsible person: Assistant Principal [Student Welfare]

Positive Mental Health Policy

Policy Statement

Mental health is 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. (World Health Organization)

At our school, we aim to promote positive mental health for every member of our staff and student body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable students.

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. In an average classroom, three children will be suffering from a diagnosable mental health issue. By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for students affected both directly, and indirectly by mental ill health.

Scope

This document describes the school's approach to promoting positive mental health and wellbeing. This policy is intended as guidance for all staff including non-teaching staff and governors.

This policy should be read in conjunction with our SEND policy in cases where a student's mental health overlaps with or is linked a student's special educational need.

The Policy Aims to:

- Promote positive mental health in all staff and students
- Increase understanding and awareness of common mental health issues
- Alert staff to early warning signs of mental ill health
- Provide support to staff working with young people with mental health issues
- Provide support to students suffering mental ill health and their peers and parents/carers

Lead Members of Staff

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

- Ben Stevens- Assistant Vice Principal and Academy Safeguarding Lead
- Carolyn Metcalfe – Lead Child Protection
- Gemma Bentley - Lead Wellbeing Coordinator
- Heather Howard – SENCO

- Michael Williams - Continuing Professional Development (CPD) Lead
- Joanna McDonough - Head of PSHE
- Lauren Robson – EAL Coordinator

Any member of staff who is concerned about the mental health or wellbeing of a student should speak to the Lead Wellbeing Coordinator in the first instance. ***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 child protection office of staff or the head teacher.*** If the student 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.

Individual Care Plans

It is helpful to draw up an individual care plan for pupils causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the pupil, the parents, relevant health professionals and school-based staff such as SENCO and Wellbeing coordinator.

This can include:

- Details of a pupil's condition
- Special requirements and precautions
- Medication and any side effects
- What to do, and who to contact in an emergency
- The role the school can play

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 developmental PSHE curriculum. Mental health is embedded into the PSHE curriculum as there are mindfulness sessions at the start of each lesson but also with the Academy's spiral curriculum where as part of the Health and Wellbeing unit, mental health is continually being reviewed and made aware of for our students within each year group.

The specific content of lessons will be determined not just by the statutory PSHE requirements that the PSHE curriculum follows but also by the specific needs of the cohort we're 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.

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

Signposting

We will ensure that staff, students and parents are aware of sources of support within school and in the local community. What support is available within our school and local community, who it is aimed at and how to access it is outlined in Appendix A.

We will display relevant sources of support in communal areas such as the school library, reception and corridors where we will regularly highlight sources of support to students within relevant parts of the curriculum. Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring students 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 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 with Gemma Bentley, our Wellbeing coordinator.

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
- 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 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 non-judgemental.

Staff should listen, rather than advise and our first thoughts should be of the student's emotional and physical safety rather than of exploring 'Why?'

All disclosures should be recorded on CPOMS as this will be kept on the student's file.

This record should include:

- Main points from the conversation
- Agreed next steps/actions

This information should be shared with the Wellbeing lead, Gemma Bentley who will provide respond to the disclosure and support any further actions.

Again, ***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 child protection office of staff or the head teacher.***

Confidentiality

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

- 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 student without first telling them. Ideally, we would receive their consent, however if the student is up to the age of 16 and you are concerned that they are at risk of harm then follow the Child protection policy.

It is always advisable to share disclosures with a colleague, usually the Wellbeing Lead as this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the student, it ensures continuity of care in our absence and it provides an extra source of ideas and support. We should explain this to the student and discuss with them who it would be most appropriate and helpful to share this information with.

Parents must always be informed if any of the warning signs are present and they are causing you or the student concern. We should always give students the option of us informing parents for them or with them. If a student gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but the child protection officer Carolyn Metcalfe must be informed immediately and actions will be taken appropriate to the concern.

Referrals

To access support for our students the reason/concern needs to be reported on CPOMS under wellbeing. The Wellbeing Coordinator will then discuss it with the wellbeing team and establish a plan for moving forward. The referrer will be notified with the outcome.

Referrals can be made for concerns such as-

- Low self-esteem and confidence
- Manging feelings
- Stress and anxiety within school
- **Changes** in behaviour such as becoming withdrawn, risk taking and disruptive.
- Family issues such as separation and loss
- Eating disorders
- Body image
- Bereavement

Working with Parents

Where it is deemed appropriate to inform parents, we need to be sensitive in our approach. Before disclosing to parents, 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?
- Who should be present? Consider parents, the student, and other members of staff.
- What are the aims of the meeting?

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 should be accepting of this (within reason) and give the parent 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 can also be helpful too e.g. parent 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 often have many questions as they process the information. Finish each meeting with agreed next step and always keep a brief record of the meeting on the child's confidential record.

Working with All 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 school website
- Ensure that all parents are aware of who to talk to, and how to get about this, if they have concerns about their own child or a friend of their child
- Make our mental health policy easily accessible to parents
- Share ideas about how parents can support positive mental health in their children through our coffee mornings and parents' evenings
- Keep parents informed about the mental health topics their children are learning about in PSHE

Supporting Peers

When a student 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. Support will be provided either in one to one or group settings and will be guided by conversations by the student 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 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 in order 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.

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 Emma Hamer, our CPD Coordinator who can also highlight sources of relevant training and support for individuals as needed.

Policy Review

This policy will be reviewed every 3 years as a minimum though we will always aim to update annually. It is next due for review in September 2022.

Additionally, this policy will be reviewed and updated as appropriate on an ad hoc basis. If you have a question or suggestion about improving this policy, this should be addressed to Ben Stevens our Assistant Head overseeing pastoral and mental health.

Appendix A: Sources or support at school and in the local community

School Based Support

At The Boulevard Academy we have a wide range of support including-

- Class teachers
- Head of Year
- Head of Phase
- Senior Pastoral Leads
- Wellbeing staff offering 1-1 and group sessions with students, drop in sessions, self-referrals all for students regarding their mental health and wellbeing.
- HeadStart services which aims to:

“Enable children and young people to have positive mental health and wellbeing, thrive in ‘their communities’ and to ‘bounce back’ from life’s challenges”

HeadStart Hull is embedded within an early help approach to improving outcomes for children, young people and families. Support available include-

- Young People’s Peer Mentoring- supporting issues such as Exam stress, Lack of peer networks, Lack of positive peer influences, Low self-esteem and confidence, Identified concern at transition from primary to secondary
- SMILE community group support issues such as Bullying, Ongoing stress, Body image issues (low level), Low self-esteem and confidence, Lack of aspirations, Lack of problem solving skills, Lack of experience of success or achievement, Lack of trusted adults in school or community, Lack of wider supportive networks, Changes in behaviour at school/ in community – e.g. disruptive, withdrawn, observed increase in risk taking behaviours
- Emotional Health and Resilience Coaches supporting issues such as Identified concern at transition from primary to secondary; from secondary into education, employment and training; or from regular school

to school transition (e.g. frequent school moves), Multiple emotional health issues (risks and symptoms) across young person and family

- Parent's Peer Mentoring supporting issues such as changes in family circumstance e.g. family breakdown, unemployment, debt, decline in parental mental health, Lack of supportive family networks, Social isolation of family, Support and advice on positive parenting and boundaries, Family links and talking teens parenting strategies, Issues related to parenting teenagers
- Parenting Programmes supporting issues such as changes in family circumstance e.g. family breakdown, unemployment, debt, decline in parental mental health, Lack of supportive family networks, Social isolation of family, Support and advice on positive parenting and boundaries, Family links and talking teens parenting strategies, Issues related to parenting teenagers

School website

We aim to promote positive mental health for every member of our student body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable students. Parents and students can access the wellbeing section to help inform them of these services and also use the information available to seek support themselves.

Local Support

There is a wide range of additional information available on-line to help children and young people, parents and carers, and professionals to look after their own emotional well-being and that of the children and young people they support.

Below is a selection of some of these websites;

- [HeadStart Hull YouTube Channel](#) – The HeadStart Hull You Tube channel includes films and videos about children and young people's mental health and emotional well-being. Films have been made by, or chosen by, children and young people.
- www.howareyoufeeling.org.uk/ – How Are You Feeling provides advice and support for young people on emotional health and access to information on local services, as well as links to other relevant websites.
- www.caremonkeys.co.uk – this app was developed and designed with young people in Hull to provide advice and support on common issues such as bullying in a safe digital environment. The app contains advice, articles, top tips, videos and facilities to report issues in a safe environment.
- www.youngminds.org.uk – Young Minds offers information for young people on emotional wellbeing and mental health for young people and parents. It has an online chat function and also has a parents helpline 0800 8025544
- www.bullying.co.uk – Bullying UK offers advice and support to anyone affected by bullying. It also has an online chat function and a helpline 0808 8002222.
- www.beateatingdisorders.org.uk – Beat provides support to help young people beat their eating disorders. It also has an online chat function and a helpline 0808 8010711
- www.nshn.co.uk – National Self Harm Network aims to support, empower and educate people about self-harm. It also has an online forum.
- www.talktofrank.com – Frank offers friendly, confidential advice about drugs. It also has an online chat function and a helpline 0300 1236600
- www.childline.org.uk – Childline can be contacted about anything, no problem is too big or too small. It also has an online chat function and a helpline 0800 1111

- www.samaritans.org – The Samaritans they offer a safe place to talk, anytime you like, in your own way, telephone 116123 or email jo@samaritans.org
- www.papyrus-uk.org – prevention of suicide in young people. They have a helpline called HOPEline 0800 068 4141
- www.seedeatingdisorders.org.uk – offers support services to people affected by eating disorders in Hull and East Riding
- www.heywind.org.uk/ provides advice and support for people experiencing mental health problems or who have concern regarding their parents or children. Call 01482 240200 to access support from their services or be signposted in the right direction
- www.camhs.humber.nhs.uk/ Provides help and support for children and young people experiencing mental health difficulties
- www.kooth.com/ Kooth is a free, safe and anonymous online support system for 11-25 year olds. It can allow users to receive one-to-one online sessions with qualified counsellors, receive and provide peer-to-peer support through moderated online forums, and read and contribute to mental health and wellbeing articles.

Appendix B: Talking to students when they make mental health disclosures

The advice below is from students themselves, in their own words, together with some additional ideas to help you in initial conversations with students when they disclose mental health concerns. This advice should be considered alongside relevant school policies on pastoral care and child protection and discussed with relevant colleagues as appropriate.

Focus on listening

“She listened, and I mean REALLY listened. She didn’t interrupt me or ask me to explain myself or anything, she just let me talk and talk and talk. I had been unsure about talking to anyone but I knew quite quickly that I’d chosen the right person to talk to and that it would be a turning point.”

If a student has come to you, it’s because they trust you and feel a need to share their difficulties with someone. Let them talk. Ask occasional open questions if you need to in order to encourage them to keep exploring their feelings and opening up to you. Just letting them pour out what they’re thinking will make a huge difference and marks a huge first step in recovery. Up until now they may not have admitted even to themselves that there is a problem.

Don’t talk too much

“Sometimes it’s hard to explain what’s going on in my head – it doesn’t make a lot of sense and I’ve kind of gotten used to keeping myself to myself. But just ‘cos I’m struggling to find the right words doesn’t mean you should help me. Just keep quiet, I’ll get there in the end.”

The student should be talking at least three quarters of the time. If that’s not the case then you need to redress the balance. You are here to listen, not to talk. Sometimes the conversation may lapse into silence. Try not to give in to the urge to fill the gap, but rather wait until the student does so. This can often lead to them exploring their feelings more deeply. Of course, you should interject occasionally, perhaps with

questions to the student to explore certain topics they've touched on more deeply, or to show that you understand and are supportive. Don't feel an urge to over-analyse the situation or try to offer answers. This all comes later. For now your role is simply one of supportive listener. So make sure you're listening!

Don't pretend to understand

"I think that all teachers got taught on some course somewhere to say 'I understand how that must feel' the moment you open up. YOU DON'T – don't even pretend to, it's not helpful, it's insulting."

The concept of a mental health difficulty such as an eating disorder or obsessive compulsive disorder (OCD) can seem completely alien if you've never experienced these difficulties first hand. You may find yourself wondering why on earth someone would do these things to themselves, but don't explore those feelings with the sufferer. Instead listen hard to what they're saying and encourage them to talk and you'll slowly start to understand what steps they might be ready to take in order to start making some changes.

Don't be afraid to make eye contact

"She was so disgusted by what I told her that she couldn't bear to look at me."

It's important to try to maintain a natural level of eye contact (even if you have to think very hard about doing so and it doesn't feel natural to you at all). If you make too much eye contact, the student may interpret this as you staring at them. They may think that you are horrified about what they are saying or think they are a 'freak'. On the other hand, if you don't make eye contact at all then a student may interpret this as you being disgusted by them – to the extent that you can't bring yourself to look at them. Making an effort to maintain natural eye contact will convey a very positive message to the student.

Offer support

"I was worried how she'd react, but my Mum just listened then said 'How can I support you?' – no one had asked me that before and it made me realise that she cared. Between us we thought of some really practical things she could do to help me stop self-harming."

Never leave this kind of conversation without agreeing next steps. These will be informed by your conversations with appropriate colleagues and the schools' policies on such issues. Whatever happens, you should have some form of next steps to carry out after the conversation because this will help the student to realise that you're working with them to move things forward.

Acknowledge how hard it is to discuss these issues

"Talking about my bingeing for the first time was the hardest thing I ever did. When I was done talking, my teacher looked me in the eye and said 'That must have been really tough' – he was right, it was, but it meant so much that he realised what a big deal it was for me."

It can take a young person weeks or even months to admit they have a problem to themselves, let alone share that with anyone else. If a student chooses to confide in you, you should feel proud and privileged that they have such a high level of trust in you. Acknowledging both how brave they have been, and how glad you are they chose to speak to you, conveys positive messages of support to the student.

Don't assume that an apparently negative response is actually a negative response

"The anorexic voice in my head was telling me to push help away so I was saying no. But there was a tiny part of me that wanted to get better. I just couldn't say it out loud or else I'd have to punish myself."

Despite the fact that a student has confided in you, and may even have expressed a desire to get on top of their illness, that doesn't mean they'll readily accept help. The illness may ensure they resist any form of help for as long as they possibly can. Don't be offended or upset if your offers of help are met with anger, indifference or insolence, it's the illness talking, not the student.

Never break your promises

"Whatever you say you'll do you have to do or else the trust we've built in you will be smashed to smithereens. And never lie. Just be honest. If you're going to tell someone just be upfront about it, we can handle that, what we can't handle is having our trust broken."

Above all else, a student wants to know they can trust you. That means if they want you to keep their issues confidential and you can't then you must be honest. Explain that, whilst you can't keep it a secret, you can ensure that it is handled within the school's policy of confidentiality and that only those who need to know about it in order to help will know about the situation. You can also be honest about the fact you don't have all the answers or aren't exactly sure what will happen next. Consider yourself the student's ally rather than their saviour and think about which next steps you can take together, always ensuring you follow relevant policies and consult appropriate colleagues.