



Pupil Mental Health and Wellbeing Policy

Document provenance

This policy was approved as follows –

Executive Leadership Team

Date: September 2019

Frequency of review:

Unless there are legislative or regulatory changes in the interim, this policy will be reviewed every two years. Should no substantive changes be required at that point, the policy will move to the next review cycle

ELT Owner: CEO

Related documents:

- E-ACT Staff Mental Health and Wellbeing Policy
- E-ACT Equality and Diversity Policy
- E-ACT Child Protection and Safeguarding Policy
- E-ACT SEND and Learning Policy

Summary of policy:

This policy outlines how E-ACT Academies will work to promote the positive mental health and wellbeing of all pupils to enable them to flourish.

Academy Mental Health Lead is:	Mrs Sarah Mansell
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Mental Health and Wellbeing Policy

1. Introduction and purpose

- 1.1. Within our Academy, we aim to promote positive mental health and wellbeing for our whole Academy community (pupils, 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 and young people's mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. All children and young people move up and down the mental health continuum during their Academy career. However, some face significant life events which can seriously impact their emotional wellbeing and can include mental illness.

- 1.2. The Department for Education (DfE) recognises that: “Schools have a role to play in supporting the mental health and wellbeing of children”¹ (Mental Health and Behaviour in School, 2018). Schools can be a place for all pupils to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience. The academy is also a place of respite from difficult home lives and offers, positive role models and relationships, which are critical in promoting the wellbeing of all young people.
- 1.3. The role of the Academy is to ensure that pupils are able to manage times of change 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 pupils 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.
- 1.4. The aim is to help develop the protective factors which build resilience to mental health difficulties and to be an academy where:
- All pupils are valued
 - Pupils have a sense of belonging and feel safe
 - Pupils feel able to talk openly about their problems without feeling stigma or discrimination.
 - Positive mental health is promoted and valued
 - Bullying is not tolerated.

2. Scope

- 2.1 This policy applies to all staff, pupils, parents/carers, visitors to the academy and the community.

3. Legislation and regulation

Definition of mental health

- 3.1. Mental health and wellbeing is defined as *“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.”*²

¹ Mental Health and Behaviour in School, 2018

² World Health Organisation - http://www.who.int/features/factfiles/mental_health/en/ ³
<https://www.gov.uk/guidance/equality-act-2010-guidance>

3.2. Mental health and wellbeing is not just the absence of mental health problems. We want all our pupils 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.

3.3. Under the Equality Act 2010³ a child or young person with a mental health illness is described as having a mental impairment and therefore a disability. A disability is described in law (the Equality Act 2010) as ‘a physical or mental impairment, which has a long-term (a year or more) and substantial adverse effect on their ability to carry out normal day-to-day activities.’

3.4. The Equality Act requires early year’s providers, schools, colleges, other educational settings and local authorities to:

- Not directly or indirectly discriminate against, harass or victimise disabled children and young people;
- Make reasonable adjustments, so that disabled children and young people are not disadvantaged. This duty is known as ‘anticipatory’.

3.5. All academies will operate within the law. The legal framework, statutory guidance, key policies and government strategies most pertinent to mental health can be found in:

- The Mental Health Act (2007)
- Mental Health (Discrimination) Act (2013)
- The Equality Act 2010
- The Children and Families Act 2014, Part 3
- The Special Educational Needs and Disability Regulations 2014
- The SEND Code of Practice (last updated April 2015)
- Working Together to Safeguard Children (July 2018)
- Keeping Children Safe in Education (September 2019)
- Mental health and behaviour in schools (November 2018)
- Transforming children and young people’s mental health provision: a green paper (last updated July 2018)

4. Policy statement

- 4.1. E-ACT's three core values are at the heart of all it does and this policy strongly advocates: Partnership working across academies and utilising trust expertise, local, and specialist agencies, as well as a meaningful child centred approach to supporting pupils in line with the MHFA England ALGEE framework ('Team Spirit'); High aspirations and opportunity ('Think Big'); A commitment to legal compliance and a genuine desire to support *all* children and young people ('Do the right thing').
- 4.2. We will ensure that:
- All academies will be proactive in identifying and supporting a child or young person with mental health difficulties, ensuring the pupil is at the centre of all decisions and take into account their feelings, wishes and views.
 - Academies will work closely with the local authority, external agencies and charitable organisations to ensure appropriate care is accessed to support the pupil.
 - All academies have procedures and professionals in place to enable them to fulfil their duties and to drive a caring and positive wellbeing centred ethos and vision.

Support for our Academies

- 4.3. E-ACT has a Mental Health Lead who leads the mental health strategy and provides guidance and support to MHFA instructors and any member of staff within the organisation.
- 4.4. E-ACT uses a regional model of support whereby each region is supported by a specialist group of System Leaders and a Regional Education Director. Within this group (known as the 'Raising Achievement Board') there is at least one trained MHFA instructor who is available for advice and support. The MHFA instructor ensures support and training across the region.

Approach to Positive Mental Health

- 4.5. All academies have a responsibility to promote positive mental health, and to understand about protective and risk factors for mental health (see appendix 1). Some pupils will require additional help and all staff through the Youth MHFA training will have the skills to look out for any early warning signs of mental health problems and ensure that pupils with mental health needs get early intervention and appropriate support.
- 4.6. The academies recognise that many behaviours and emotional problems can be supported within the academy environment, or with advice from external professionals. Some pupils will need more intensive support at times, and there are a range of mental

health professionals and organisations that provide support to pupils with mental health needs and their families.

- 4.7. All academies will have a pupil mental health ambassador group to support the academy in leading the promotion of positive mental health, raising awareness for pupils and within the community.
- 4.8. All academies will make reasonable adjustments for children and young people experiencing emotional distress and mental health difficulties to support recovery in line with legislation.

What our academies will do

- 4.9. Academies will designate a member of the senior leadership team to be responsible for overseeing, coordinating and championing mental health and wellbeing education and provision. The designated mental health lead for the academy is detailed on page 2.
- 4.10. Academies will prepare a mental health and wellbeing action plan and publish it on their website. The plan will set out the details regarding the implementation of the E-ACT Mental Health and Wellbeing Policy.
- 4.11. Academies will ensure that all member of staff have access to Youth MHFA training and take responsibility in promoting positive wellbeing and identifying and supporting pupils experiencing mental health difficulties.
- 4.12. Academies recognise that many behaviours and emotional problems can be supported within the academy environment, or with advice from external professionals. Some pupils will need more intensive support at times, and there are a range of mental health professionals and organisations that provide support to students with mental health needs and their families.
- 4.13. Academies will ensure pupils are taught about positive mental wellbeing and mental health illnesses through the E-ACT and academy specific mental health curriculum frameworks. This will cover knowledge and social and emotional skills that will help pupils to be more resilient, understand about mental health and be less affected by the stigma of mental health difficulties.
- 4.14. Academies will:
 - Provide a safe environment to enable pupils to express themselves and be listened to.
 - Ensure the welfare and safety of all pupils
 - Identify appropriate support for pupils based on their needs.
 - Involve parents and carers when their child needs support.

- Involve pupils in the care and support they have, ensuring the voice/views of the young person is always taken into account.
 - Monitor, review and evaluate the support with children and keep parents and carers updated.
- 4.15. Academies will utilise the MHFA ALGEE framework to support with crisis situations and to inform support process:
- A** - Approach, assess and assist the young person.
 - L** - Listen and communicate non-judgementally.
 - G** - Give support and information.
 - E** - Encourage appropriate professional support.
 - E** - Encourage other supports.
- 4.16. Staff are aware that mental health needs, such as anxiety, might appear as noncompliant, disruptive or aggressive behaviour which could include problems with attention or hyperactivity. This may be related to home problems, difficulties with learning, peer relationships or development.
- 4.17. Academy staff and the mental health lead will work alongside the SENCo to support identification and the assessment for a pupil to ascertain if they should be identified as 'SEND Support' under the category of Social, Emotional, Mental Health (SEMH) as part of the SEND Code of Practice.
- 4.18. If a pupil has received intensive and/or specialised external mental health professional support, the academy has a duty of care to support pupils and will seek advice from medical staff and mental health professionals on the best way to support children. We will carry out a risk assessment and produce an Individual Care Plan to support children to re-integrate successfully back to Academy.
- 4.19. Academies recognise that when a pupil is experiencing mental health problems it can be challenging for their friends, who often want to help them but are not sure the best thing to do and can also be emotionally affected, therefore appropriate support will be provided.
- 4.20. Academies also recognise the importance of support for parents/carers caring for a young person with a mental health difficulty. Academies operate an open-door policy and will ensure regular communication between home and school. Staff can signpost to additional sources of support outside of the academy through the MHFA resources.

4.21. If there is a concern that a pupil is in danger of immediate harm, then the Academy’s safeguarding procedures are followed. If there is a medical emergency, then the Academy’s procedures for medical emergencies are followed.

5. Training

5.1. E-ACT has 9 trained Youth MHFA instructors to deliver the two-day youth MHFA training to all members of staff within academies. Training sessions are delivered in every region regularly throughout the academic year.

6. Responsibilities

The following responsibilities apply in relation to this policy:

- 6.1. Headteachers are responsible for ensuring a member of the senior leadership team is the designated mental health lead within their academy.
- 6.2. The Mental Health Lead is responsible for overseeing, coordinating and championing mental health and wellbeing education and provision.
- 6.3. System Leaders who are trained MHFA instructors are responsible for supporting academies with meeting the requirements of the Mental Health and Wellbeing policy.
- 6.4. All staff are responsible for promoting positive wellbeing and identifying and supporting pupils experiencing mental health difficulties.
- 6.5. Pupil Mental Health Ambassadors will support in the promotion of positive mental wellbeing.
- 6.6. Trustees and the Executive Leadership Team have overall responsibility for the implementation and approval of this policy.

7. Monitoring and compliance

7.1. Regional System Leaders trained as Youth MHFA instructors will monitor compliance with this policy within the academies in their respective regions. They report to the Regional Education Director and Mental Health Lead, who in turn reports to the Regional Performance Boards.

Appendix 1

Protective Factors and Risk Factors

(Adapted from Mental health and behaviour in schools (November 2018)³:

	Risk Factors	Protective Factors
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³ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/755135/Mental_health_and_behaviour_in_schools_.pdf

In the Child	<ul style="list-style-type: none"> • Genetic influences • Specific development delay • Communication difficulties • Physical illness • Academic failure • Low self-esteem • SEND 	<ul style="list-style-type: none"> • 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 and a positive attitude • Experiences of success and achievement • Faith or spirituality • Capacity to reflect
In the Family	<ul style="list-style-type: none"> • Overt parental conflict including domestic violence • Family breakdown (including where children are taken into care or adopted) • Inconsistent or unclear discipline • 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 	<ul style="list-style-type: none"> • At least one good parent-child relationship (or one supportive adult) • Affection • Clear, consistent discipline • Support for education • Supportive long-term relationship or the absence of severe discord
	<ul style="list-style-type: none"> • Death and loss – including loss of friendship 	

<p>In the Academy</p>	<ul style="list-style-type: none"> • • Bullying • Discrimination Breakdown in or lack of • • positive friendships • Negative peer influences Peer pressure • Inconsistent implementation of the behaviour policy. Poor relationships with staff 	<ul style="list-style-type: none"> • Clear policies on behaviour and bullying • ‘Open door’ policy for children to raise problems • A whole-Academy approach to promoting good mental health • Positive relationships between pupils and staff
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Appendix 2

For support on specific mental health needs:

- Anxiety UK www.anxietyuk.org.uk
- OCD UK www.ocduk.org
- Depression Alliance www.depressoinalliance.org
- Eating Disorders www.b-eat.co.uk and www.inourhands.com
- National Self-Harm Network www.nshn.co.uk www.selfharm.co.uk
- Suicidal thoughts [Prevention of young suicide UK – PAPHOS: www.papyrus-uk.org](http://www.preventionofyoungsuicide.org.uk)
- www.youngminds.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.rethink.org challenges attitudes towards mental health



Appendix 3

Academy Action Plan:

RAISING AWARENESS AND IMPLEMENTATION OF THE POLICY				
Objective	Actions	Who is responsible?	Time scale	Evaluation / Impact
Student led activities	<p>Pupil Wellbeing Champions group who meet half termly with a wellbeing focus and plan fundraising and awareness activities.</p> <p>Pupil friendly and age appropriate notice boards.</p> <p>Pupil buddies / mentors to support each other.</p> <p>Random acts of kindness & compliments board.</p> <p>Pupil voice and questionnaires.</p> <p>Pupil friendly reporting tools e.g. worry boxes, meet and greets, 3 houses etc.</p> <p>Pupils sharing wellbeing activities, what they enjoy, what works for them to maintain positive emotional wellbeing e.g. exam stress management techniques.</p>	<p>MH Champion</p> <p>SLT</p> <p>All staff</p>	<p>Pupil MH ambassadors meet fortnightly.</p> <p>Awareness activities held at least termly.</p> <p>Questionnaires twice a year.</p>	<p>Pupils have ownership and actively involved with raising awareness of wellbeing and mental health and supporting each other.</p> <p>Pupil voice and questionnaires identifies improved wellbeing as a result of activities and actions.</p> <p>Pupils learn how to support themselves as well as others, recognising their emotions, level of wellbeing and how to maintain or improve it.</p> <p>Children will be confident knowing where they can get help and will not be ashamed or embarrassed about their mental health.</p>
Academy activities (incl. details of how the academy will implement the E-ACT mental health curriculum)	<p>Assemblies to raise awareness.</p> <p>Mental health curriculum is delivered within PSHE lessons and Reflection time activities. This includes our E-ACT personalized curriculum as well as jigsaw curriculum.</p> <p>RnR curriculum is currently being delivered to support with resilience and wellbeing during lockdown.</p> <p>Displays to share information about wellbeing and mental health for pupils.</p>	<p>MH Champion</p> <p>SLT</p> <p>All staff</p> <p>SEND team</p>	<p>MH curriculum is taught weekly and progress of learning is tracked termly.</p> <p>Half termly assemblies.</p> <p>Display boards updated termly.</p>	<p>Pupils will know how to recognise signs of ill mental health in themselves and others.</p> <p>Pupils will know where to access help and be able to support others as well as implement self-help strategies.</p> <p>Academy has a clear and robust system for identifying students as well as tracking and monitoring their wellbeing linked to the MHFA continuum.</p>

	<p>Promoting and taking part in key Mental Health events such as Mental Health Week etc.</p> <p>Mental health and wellbeing surveys.</p> <p>Access to a safe space to support managing emotions and receive support from staff.</p> <p>Graduated approach to supporting students (detailed below).</p> <p>Clear referral form and process for staff to access support and raise concerns for a pupils MH and wellbeing.</p> <p>Daily check-ins with every student to assess their wellbeing.</p> <p>CPOMS utilised to track and record metal health concerns, support and impact.</p> <p>Range of interventions available to support pupils with MH and WB difficulties, including all staff TIAAS trained, ELSA trained member of staff, etc (Further details below).</p> <p>Training for staff on MH and WB through MHFA, E-ACT CPD and external agencies.</p> <p>Mental health and wellbeing needs are accounted for in academy policies including the behaviour and anti-bullying policies.</p>		<p>Questionnaires completed twice a year.</p> <p>Safe space to be implemented by S Mansell</p> <p>Referral process implemented by S Mansell</p> <p>Staff training delivered S Mansell with the EP service</p>	<p>Academy has a clear graduated response to supporting students with SEMH needs linked to the SEND COP.</p> <p>Academy has access to evidenced based assessments and interventions to identify, support and track pupils.</p> <p>Academy systems means no child is left behind or missed.</p> <p>The whole academy work collaboratively to support and identify students.</p> <p>The academy has an ethos of caring and kindness.</p>
Family / community activities	<p>Fundraising and campaign events to raise awareness.</p> <p>Parent / carer training opportunities to learn about MH and WB and how to support their children. (To be planned in once Covid restrictions are relaxed)</p> <p>Coffee morning support groups for parents to understand contributors to own wellbeing led</p>	MH champion	<p>Events running twice a year.</p> <p>Parent training session to beginning-TBC. And run every week for 6 weeks.</p>	<p>Parents will be able to recognise the signs of Mental health and will know where to go to get help for themselves or a family member and will know who to talk to in school if they require additional help.</p> <p>Working collaboratively with charities widens sources of support for the community.</p>

	<p>by external professionals and safeguarding team.</p> <p>Approachable outreach and safeguarding team who provide supportive listening signposting for families.</p> <p>Flyers, notice boards and website information to share sources of support.</p> <p>Working collaboratively with local charities and external agencies to raise awareness.</p> <p>Parent / carer wellbeing surveys.</p>		<p>Coffee mornings to be held every half term following covid restrictions relaxation</p>	
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Assessment, Interventions and Support			
Level of need	Assessment and Early Identification Indicators	Interventions and Support Available The kinds of intervention and support provided will be decided in consultation with key members of staff, parents and children	Monitoring
High need	<p>Live Vulnerable Pupil Tracker that all staff are aware of.</p> <p>VPT is updated weekly with mental health and wellbeing being an indicator.</p> <p>Aim to train all staff in Youth Mental Health First Aid (2 or 3 staff members trained every term).</p> <p>Staff to have clear indicators to look out for (At a glance booklet).</p> <p>Children discussed in weekly safeguarding meetings.</p> <p>SEND referral system.</p> <p>Whole school pupil wellbeing measures.</p> <p>SEMH specific assessments (SDQ, SCARED-R, perceived stress scale, Rosenberg self-esteem scale etc).</p> <p>EP assessments.</p> <p>External agency assessments (CAMHS, Psychologists etc).</p> <p>Parent concerns.</p>	<p>Interventions recorded on VPT</p> <p>Daily check ins are timetabled and can occur several times every day</p> <p>Risk Assessment in place and written with safeguarding team and other key members of staff</p> <p>Daily access to ELSA trained member of staff as needed.</p> <p>1:1 support including using CBA.</p> <p>RAMP plans written</p> <p>Regular communication and updates with parents and carers</p> <p>CAMHS referral where deemed necessary</p> <p>Signposting to mental health and wellbeing display board.</p> <p>Graduated response adhered to: Wave 2 interventions: Individual ELSA sessions, CBT support, SFBT support, Circle of friends, Mindfulness intervention etc. Wave 3 interventions: Counselling sessions, EP sessions, CAMHS, Place to be support, BEAT, Papyrus, Edward's Trust etc.</p> <p>Primary Mental Health Service (PMHS) free telephone consultations for concerns.</p> <p>Access to 'safe space'.</p> <p>Individualised support plans.</p> <p>Safety Plans.</p> <p>Crisis plans.</p> <p>Hope boxes.</p> <p>Learning assessments where anxiety links to learning by PSS.</p>	<p>Regular reviews of the risk assessments and ramp plans.</p> <p>Parental voice to be include in reviews.</p> <p>Child voice to be included in reviews.</p> <p>Mental health mini-lead to link reviews in direct whole school and pupil actions.</p> <p>Baseline assessments and interventions review assessments.</p> <p>Reports from external agencies.</p> <p>Attendance and behaviour data.</p> <p>Multi-agency meetings.</p> <p>Whole school wellbeing measures.</p>

<p>Some need</p>	<p>Pupil mental health signposting. Children discussed in safeguarding meetings or vulnerable pupil panels etc. Pupil voice screens three times a year to identify need and targets. Whole school wellbeing measures. Referrals to the SEND team. Parent concerns. SEMH specific assessments (SDQ, SCARED-R etc). Worry boxes.</p>	<p>Daily check ins are timetabled. Group ELSA interventions. Access to wellbeing room during break and lunchtime. Regular communication and updates with parents and carers. LSA intervention e.g. mentoring, 1:1 emotions coaching support. Weekly jigsaw / PSHE lessons Signposting to mental health and wellbeing display board. SEMH interventions e.g. Graduated response adhered to: Individual THRIVE sessions, CBT support, SFBT support, Circle of friends, Mindfulness intervention, Social skills group, Emotional Regulation groups etc. Access to the MH safe space. Learning assessments where anxiety linked to learning by SENCo. Language Link screening</p>	<p>Evidence of ELSA interventions and evaluations Pupil voice screening evidence (3 houses) Evaluated jigsaw lessons Baseline and impact measures from assessments and evidence based interventions e.g. SDQs. Behaviour and attendance monitoring. Worry box analysis.</p>
<p>Low need</p>	<p>Pupil mental health signposting. Children discussed with key members of staff as appropriate. Pupil voice 3 times a year. Parent concerns. Worry boxes. Whole school wellbeing measures.</p>	<p>Weekly Jigsaw / PSHE lessons. Signposting to mental health and wellbeing display board. Daily check ins by classroom team. Group interventions or whole group targets. LSA support. Pupil Wellbeing champion programme. Celebration days and recognition events for the whole school e.g. world mental health day. Targeted MH and WB assemblies. All staff TIAAS trained.</p>	<p>Evidence of interventions and evaluations Pupil and Parent voice Evaluated jigsaw lessons. Staff to evidence assemblies and student voice. Worry box analysis.</p>

