Promoting Positive Emotional Health & Wellbeing Policy

A Whole School Approach

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Promoting Positive Emotional Health & Wellbeing

Rationale

Research has found that in an average class of 30 15-year-old pupils:

- three could have a mental disorder
- ten are likely to have witnessed their parents separate
- one could have experienced the death of a parent
- seven are likely to have been bullied
- six may be self-harming

The Department for Education (DfE) recognises that: 'in order to help their pupils succeed; schools have a role to play in supporting them to be resilient and mentally healthy'. Ofsted has highlighted that children and young people themselves say that they want to learn more about how to keep themselves emotionally healthy.

The National Institute for Health and Care Excellence (NICE) advises that primary schools and secondary schools should adopt a comprehensive, 'whole school' approach to promoting the social and emotional wellbeing of children and young people. Such an approach it says should move beyond learning and teaching to pervade all aspects of the life of a school, and has been found to be effective in bringing about and sustaining health benefits.

The DfE also identifies a whole-school approach to promoting good mental health as a protective factor for child and adolescent mental health. The report of the Children and Young People's Mental Health and Wellbeing Taskforce (2015) identifies a national commitment to "encouraging schools to continue to develop whole school approaches to promoting mental health and wellbeing".

This document should be read alongside statutory guidance on 'Keeping Children Safe in Education 'Supporting pupils at school with medical conditions and existing advice on targeted approaches for supporting pupils with, or at risk of developing mental health problems including:

- [Mental Health and Behaviour advice for Schools](#)
- [Promoting children and young peoples emotional health and wellbeing](#)
- [Counselling in schools](#)

Factors that put children at risk

Certain individuals and groups of pupils are more at risk of developing mental health problems than others. These risks can relate to the child themselves, to their family, or to their community or life events. These risk factors which are listed in **Table 1** below are cumulative. Children exposed to multiple risks such as social disadvantage, family adversity and cognitive or attention problems are much more likely to develop behavioural problems.

Factors that make children more resilient

Some children, despite being exposed to significant risk factors, continue to develop into competent, confident and caring adults. An important key to promoting children's mental health is therefore an understanding of the protective factors that enable children to be resilient when they encounter problems and challenges.

'*Resilience seems to involve several related elements. Firstly, a sense of self-esteem and confidence; secondly a belief in one's own self-efficacy and ability to deal with change and adaptation; and thirdly, a repertoire of social problem solving approaches.*'

There is a complex interplay between risk factors in children's lives and promoting their resilience. As social disadvantage and the number of stressful life events accumulate for children or young people, more factors that are protective are needed to act as a counterbalance. The key protective factors, which build resilience to mental health problems, are shown alongside the risk factors in **Table 1**, below.

The role that our can schools play in promoting the resilience of their pupils is vital, particularly so those children where their home life is less supportive. Our school will be safe and affirming places for children where they can develop a sense of belonging and feel able to trust and talk openly with adults about their problems.

Table 1

	Risk factors	Protective factors
In the child	- Genetic influences - Low IQ and learning disabilities - Specific development delay or neuro-diversity - Communication difficulties - Difficult temperament - Physical illness - Academic failure - Low self-esteem	- 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 and a positive attitude - Experiences of success and achievement - Faith or spirituality - Capacity to reflect
In the family	- 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, neglect or emotional abuse - Parental psychiatric illness - Parental criminality, alcoholism or personality disorder - Death and loss – including loss of friendship	- 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
In the School	- Bullying - Discrimination - Breakdown in or lack of positive friendships - Deviant peer influences - Peer pressure - Poor pupil to teacher relationships	- Clear policies on behaviour and bullying 'Open door' policy for children to raise problems - A whole-school approach to promoting good mental health - Positive classroom management - A sense of belonging - Positive peer influences

In the community	• Socio-economic disadvantage • Homelessness • Disaster, accidents, war or other overwhelming events • Discrimination • Other significant life events	• 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

Difficult events that may have an effect on pupils

Form tutors and class teachers see their pupils day in, day out. They should know them well and be well placed to spot changes in behaviour that might indicate a problem. The balance between the risk and protective factors set out above is most likely to be disrupted when difficult events happen in pupils' lives. These include:

- **loss or separation** – resulting from death, parental separation, divorce, hospitalisation, loss of friendships (especially in adolescence), family conflict or breakdown that results in the child having to live elsewhere, being taken into care or adopted;

- **life changes** – such as the birth of a sibling, moving house or changing schools or during transition from primary to secondary school, or secondary school to sixth form; and

- **traumatic events** such as abuse, domestic violence, bullying, violence, accidents, injuries or natural disaster.

Our Schools will provide to support children at such times, intervening where possible to help prevent mental health problems from developing.

Promoting pupils' mental health

The following diagram presents the eight principles that will be adhered to by our schools to promote emotional health and wellbeing.

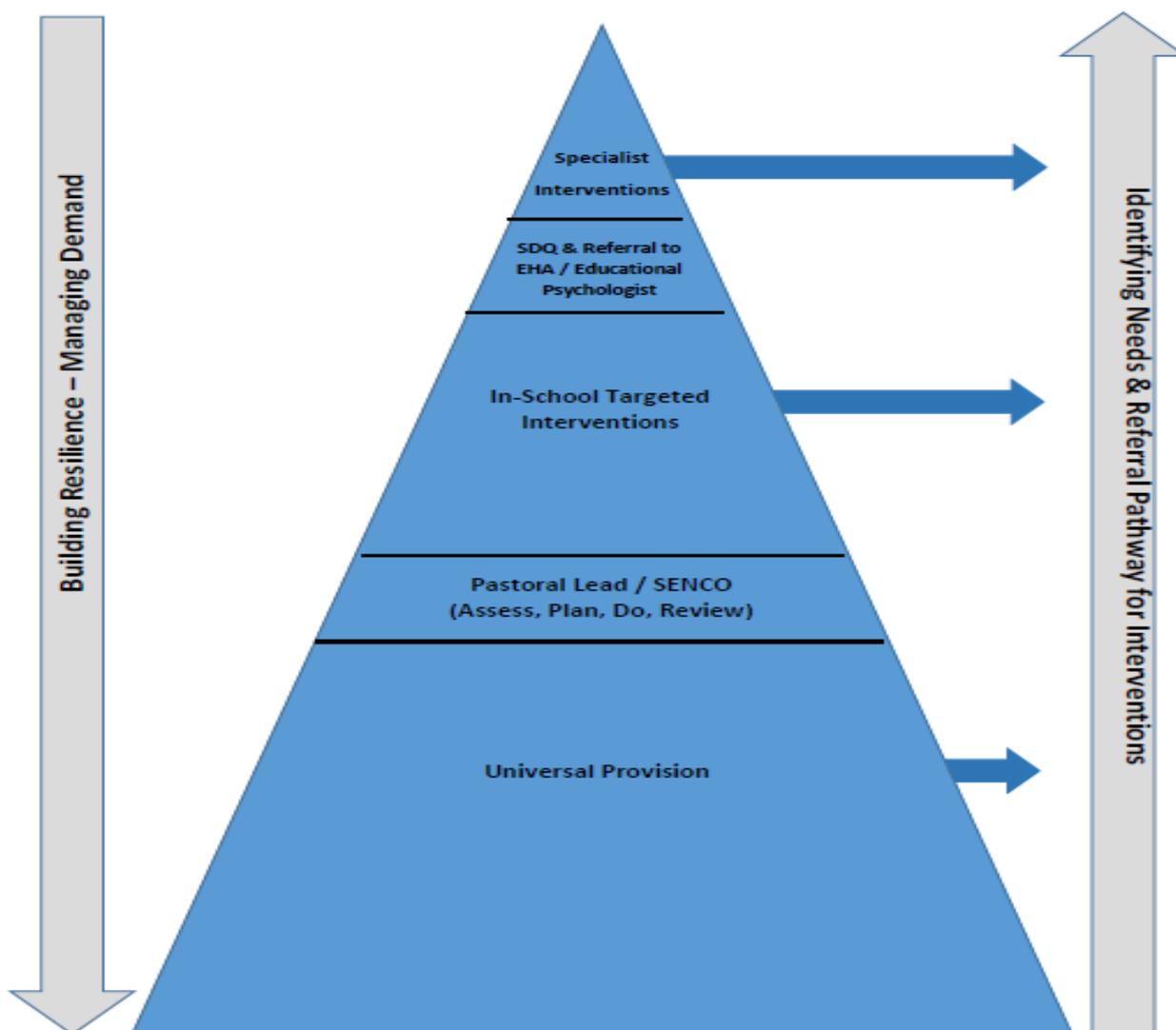We will promote the emotional health & wellbeing of our pupils through:

- **a committed Senior Management Team** that sets a culture within the school that values all pupils; allows them to feel a sense of belonging; and makes it possible to talk about problems in a non-stigmatising way.

- **adopting an ethos of setting high expectations of attainment for all pupils with consistently applied support.** This includes clear policies on behaviour and bullying that set out the responsibilities of everyone in the school and the range of acceptable and unacceptable behaviour for children. These are available and understood clearly by all, and consistently applied by staff.

- **an effective strategic role Special Educational Needs Co-ordinator (SENCo),** ensuring all adults working in the school understand their responsibilities to children with Special Educational Needs and Disabilities (SEND), including pupils whose persistent mental health difficulties mean they need special educational provision. The SENCo will ensure colleagues understand how the school identifies and meets pupils' needs, provide advice and support to colleagues as needed and liaise with external SEND professionals as necessary.

- **working with parents and carers as well as with the pupils themselves**, ensuring their opinions and wishes are taken into account and that they are kept fully informed so they can participate in decisions taken about them.

- **the continuous professional development for staff** that makes it clear that promoting good mental health is the responsibility of all members of school staff and informs them about the early signs of mental health problems, what is and isn't a cause for concern, and what to do if they think they have spotted a developing problem.

- **establishing clear systems and processes to help staff who identify children and young people with possible mental health problems**; providing routes to escalate issues with clear referral and accountability systems. Our schools will work closely with other professionals to have a range of support services that can be put in place depending on the identified needs (both within and beyond the school). These will be set out clearly in the school's published SEND policy and Local Offer.

- **working with others to provide interventions for pupils with mental health problems that use a graduated approach to inform a clear cycle of support:** an assessment to establish a clear analysis of the pupil's needs; a plan to set out how the pupil will be supported; action to provide that support; and regular reviews to assess the effectiveness of the provision and lead to changes where necessary; and

- **a healthy school approach to promoting the health and wellbeing of all pupils in the school**, with priorities identified and a clear process of 'planning, doing and reviewing' to achieve the desired outcomes.

Our Strategic Approach

The following diagram describes our strategic and whole school approach to the promotion of emotional health & wellbeing. At the base of our model is the concept of universal provision whereby all our children are offered an entitlement of support and access to a curriculum and other provision including extra–curricular opporutities which helps to build independence and personal resilance. Children that require a higher level of support or intervention will be identified through a systematic plan, do, review methodolgy. Children with particularly complex needs will be formally assessed before they access targeted intervertnions or are referred to specialist provision.

Our Strategic Approach to Promoting Emotional Health & Wellbeing

Building Resilience – Managing Demand

Specialist Interventions

SDQ & Referral to EHA / Educational Psychologist

In-School Targeted Interventions

Pastoral Lead / SENCO (Assess, Plan, Do, Review)

Universal Provision

Identifying Needs & Referral Pathway for Interventions

Implementation

A steering group under the direction of the Trust Lead for Emotional Health & Wellbeing, Lynn Hunter, Vice- Principal, Carmel College will implement, monitor and periodically refresh the Action Plan attached at **Appendix 1**.

ACTION PLAN

Principle 1	Leadership & Management			
Action	**Who**	**When**	**Budget**	**Status**
Appoint lead to co-ordinate Emotional Health & Wellbeing Policy across the Trust	**MAT SLT**	**February 2017**	**Nil**	**Complete**
Appoint Emotional Health & Wellbeing Lead for each school	**MAT SLT**	**February 2017**	**Nil**	**In part** R Young - St Michael's M McCollom – St Augustine's B Rizzi-Allan – St Bede's C Peacock - Holy Family L Hunter - Carmel ? – St Gregory's ? - OLSB
Prepare Draft Emotional Health & Wellbeing Policy and Action Plan	**J kenshole**	**March 2017**	**Nil**	**Complete**
Principle 2	School ethos and environment			
Action	**Who**	**When**	**Budget**	**Status**
To regularly review Bullying incidents and to identify common themes and responses and report to the LMB/IAB.	**Headeachers and pastoral leads**	**Annually each October**	**Nil**	

Action	Who	When	Budget	Status
To investigate the option of implementing peer mentoring schemes and the appointment student anti-bullying ambassadors.	Emotional Health & Wellbeing group	?	?	

Principle 3	Curriculum, teaching and learning			
Action	**Who**	**When**	**Budget**	**Status**
Develop common PSHE Resources and curriculum for emotional health & wellbeing that integrates the development of social and emotional skills within all subject areas (these skills include problem-solving, coping, conflict management/ resolution and understanding and managing feelings.	Emotional Health & Wellbeing group	?	?	
PSHE to include a focus of mindfulness techniques.	Emotional Health & Wellbeing group	?	?	
Develop a menu of extra-curricular activities and entitlement for each student (internal & external) with all children offered an opportunity.	Mental Health Leads			

The programme will include opportunities for character-building e.g. Duke of Edinburgh, National Citizen Programme and other volunteering opportunities				
Principle 4	**Student voice**			
Action	**Who**	**When**	**Budget**	**Status**
Ensure that all Trust Schools have an effective Student voice / Council.	Headteachers	?	?	
Complete Student surveys and analyse results to identify individual school and Trust-wide issues.	J Kenshole/ Headteachers	Spring 2017	Nil	
Involve young people in the creation, delivery and evaluation of the curriculum, continuing professional development and other initiatives / activities in relation to emotional health wellbeing	Emotional Health & Wellbeing group	?	?	

Principle 5	Staff development, health and wellbeing			
Action	**Who**	**When**	**Budget**	**Status**
Deliver Mental Health First Aid (MHFA) Training to all staff and develop other opportunities for Trust-wide CPD.	**Emotional Health & Wellbeing group**	?	?	
Investigate the option of training a MHFA instructor for the Trust.	**Emotional Health & Wellbeing group**	?	**£2,185 over 7 days**	
Explore the possibility of providing Emotional Literacy training to Teaching Assistants and other support staff.	**Emotional Health & Wellbeing group**			
Promote and implement the Mindful Employer Charter for Employers	**Business Manager & Headteachers**	?	?	
Provide specific training to PLMs / SENCOs on Trust referral pathways once identified.	**Emotional Health & Wellbeing group**	?	?	

Principle 6	Identifying need and monitoring impact			
Action	**Who**	**When**	**Budget**	**Status**
Systematically measure and assess young people's emotional wellbeing and use these outcomes as the basis for planning activities / interventions and evaluating their impact by developing and implementing an 'Assess, Plan, Do and Review' model.	**Emotional Health & Wellbeing group**	?	**Nil**	
Develop common referral and assessment system for implementation across all Trust schools to include the Strengths and Difficulties Questionnaire when making referrals to specialist services to provide stepped access to proven interventions.	**Emotional Health & Wellbeing group**	?	**Nil**	

Principle 7	Working with parents/carers			
Action	**Who**	**When**	**Budget**	**Status**
Ensure that all Trust Schools have an effective arrangement for parental engagement / feedback and support for parenting skills e.g. through 'Achievement for All'.				
Complete parent / carer surveys and analyse results to identify individual school and Trust-wide issues.	J Kenshole/ Headteachers	Spring 2017		
Principle 8	Targeted support			
Action	**Who**	**When**	**Budget**	**Status**
Map existing provision & interventions against universal, targeted and specialist categories.	Mental Health leads	?	?	
Agree a minimum student entitlement to access targeted interventions and provison.	Emotional Health & Wellbeing group	?	?	
Investigate the option of providing school-based counselling services	Emotional Health & Wellbeing group	?	?	