The Friars Primary School
Cannon Street
Salford
M7 3EU

Mental Health Policy

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: Sept 21

1. Policy Statement

1.1. Mental Health Promotion, Protection and Restoration

1.1.2. We aim to promote positive mental health for every member of our staff and the children in our care through using universal, whole-school approaches (Tier 1), targeted intervention(s) (Tier 2) and more intensive support where needed (Tier 3).

1.1.3. In addition to promoting positive mental health, we aim to recognise and respond to mental health difficulties. By implementing and developing a practical, relevant and effective mental health policy and procedures, we can create a safe and stable environment for children affected directly and indirectly by mental health issues and conditions.

1.2. Scope

1.2.1. This document describes our approach to promoting, protecting and restoring positive mental health and wellbeing. It is intended as guidance for all staff and governors.

1.2.2. Mental health is not simply the absence of a mental health difficulty or condition. It encompasses a wider sense of social and emotional wellbeing.

1.2.3. The policy should be read in conjunction with other policies, such as those related to safeguarding, special educational needs and/or disability (SEND) and medical needs.

2. Policy Aims

2.1. This policy aims to:

- promote positive mental health and emotional wellbeing in all staff and children;

- increase understanding and awareness of common mental health issues;

- alert staff to early warning signs of social, emotional and mental health (SEMH) difficulties;

- provide support to staff working with children with SEMH difficulties; and

- provide support to children experiencing SEMH difficulties and their parents/carers.

3. Lead Members of Staff

3.1. Staff with a SEMH Remit

3.1.1. All staff have a responsibility for promoting, protecting and restoring the mental health of children – with a specific, relevant remit in this field are:

- Mr M Earnshaw – Head Teacher & Designated Child Protection / Safeguarding Officer;

- Mr A Curtis – Deputy Head Teacher

- Miss C Wellbelove - Special Educational Needs Coordinator

- Mrs A Rowland – CAMHS School Link. Children and Families Officer & Designated Child Protection / Safeguarding Officer

- Mr C Muscatelli - Children and Families Officer & Designated Child Protection / Safeguarding Officer

3.2. Raising Concerns

3.2.1. Any member of staff who is concerned about the mental health or wellbeing of a child should speak to the Designated Safeguarding Officers

3.2.2. To ensure concerns are documented, staff are expected to raise an 'SEN Concern' or 'Mental Health Concern' using CPOMs.

3.2.3. If there is a fear that a child is in danger of immediate harm, then normal child protection and safeguarding procedures are followed with a referral to the Designated Child Protection/Safeguarding Officer.

3.2.4. Where a referral to CAMHS (Child & Adolescent Mental Health Service) is appropriate, this will be led and managed by the CAMHS School Link with liaison with the SENDCo

3.2.5. All concerns and relevant documentation related to a child's SEMH difficulties will be recorded and maintained in CPOMs and also kept in Schools Link mental health file.

3.3. Managing Disclosures & Confidentiality

3.3.1. An individual may choose to disclose concerns about themselves or another person so all staff need to know how to respond appropriately to a disclosure.

3.3.2. If a child chooses to disclose concerns about their own mental health or that of a friend to a member of staff, then the member of staff's response should always be calm, supportive and non-judgemental.

3.3.3. Staff should listen rather than advise and our first thoughts should be about the individual's emotional and physical safety.

3.3.4. All disclosures should be recorded in writing and held on file. It is expected that staff use CPOMs to document disclosures with the written record including:

- the date;

- the name of the staff member(s) involved;

- main points from the conversation; and

- agreed next steps.

3.3.5. It is important that children are not promised confidentiality. When it is necessary to pass on concerns, the following should be discussed with the child:

- who we are going to talk to;

- what we are going to tell them; and

- why we need to tell them.

3.4. Working With Parents/Carers

3.4.1. In order to support parents and carers we will:

- highlight sources of information and support about common mental health issues on our school website;

- ensure parents/carers are aware of who to talk to and how to go about doing this when they are concerned about a child's mental health;

- make our Mental Health Policy available to parents/carers;

- share ideas about how parents/carers can support positive mental health in their children; and

- keeping parents/carers informed about the mental health topics their children are learning about in PSHE (see Section 3.3)

3.5. Working With School Staff

3.5.1. In order to support school staff we will:

- consider workload and work, life balance;

- generate a culture of an open door policy for all school staff to speak confidentially about any SEMH concerns that they are experiencing;

- utilise in-house support such as having dedicated, 'Mental Health First Aiders' and the school's art therapist for school staff to speak to;

- consider appropriate support signposting for school staff. This can include;

    1) www.vivup.co.uk – website support for stress and anxiety. This includes a phone line - 0330 380 0658 and downloadable self-help documents

    2) Educational support line – www.educationalsupport.org.uk

    3) Further referrals to Occupational Health

3.6. Teaching About Mental Health

3.6.1. The skills, knowledge and understanding needed by children to keep themselves and others physically and mentally healthy and safe are included as part of PSHE. In terms of mental health, we use the PSHE (Personal, Social, Health & Economic) Association Guidance and adapting the associated lesson plans and resources to suit the cohort being taught (see Appendix I).

3.6.2. By using the PSHE Association Guidance, we ensure that we teach mental health and emotional wellbeing issues in a sensitive manner that helps rather than harms.

3.6.3. Promoting awareness of mental health issues and sources of support also involves signposting. This means our school ensures staff, children and parents/carers are made aware of the sources of help within the school and local community.

4. Assessment

4.1. Assessment Instruments in School

4.1.1. Initial information gathering and assessment may be carried out using the **Strengths and Difficulties Questionnaire (SDQ)**. This enables other assessment instruments to be selected that will provide insight into an individual's SEMH difficulties.

4.1.2. Our school also has other instruments that can be used for identification and assessment. This includes:

- The Boxall Profile
- SNAP-IV 26 Teacher & Parent Rating Scale
- Observation Profile for Schools
- School Reports

4.1.3. Where assessment is used to support a CAMHS referral, we will make reference to diagnostic criteria. Reference is also made to the Emotionally Friendly Schools (EFS) materials.

4.1.4. The purpose of an assessment is to identify specific difficulties in order to determine how a child can be best supported in school, i.e. to establish strategies and intervention(s). Effective intervention is based on thorough assessment.

4.1.5. As part of the school's commitment to the mental health of pupils there will be an annual survey screening to highlight any early concerns.

5. Intervention

5.1. Intervention at Tier 1

5.1.1, Intervention at this level is referred to as universal, involving mental health awareness and promotion. At this tier, intervention includes:

- stigma reduction;

- social and emotional aspects of learning;

- classroom and behaviour management;

- engaging parents and carers;

- restorative conferences;

- bullying prevention; and

- use of core approaches as outlined in the EFS materials.

- Referrals in-house may consist of:

  1) Well-being group

  2) Nurture group

  3) Lego therapy group

  4) Mindfulness colouring group

  5) Forest schools

  6) Resilience programmes (Year 5 & 6)

5.2. Intervention at Tier 2

5.2.1. Intervention at this level is known as targeted, involving:

- programmes for children with emerging social, emotional mental health issues;

- programmes for children with identified SEMH difficulties; and

- more frequent contact with parents/carers.

- There will also be consideration of a referral to the in house Art Therapist,

- consideration of a referral to I-Reach CAMHS; and

- use of Early Help & Prevention support for the child and family with consideration of engaging the family in an Early Help Assessment.

5.3. Intervention at Tier 3

5.3.1. Intervention at this level is intensive. It includes:

- crisis response and management;

- individual and group programmes;

- case management and risk assessment; and

- symptom-monitoring for children with pharmacological treatment.

- Consideration will also be given to referrals into Core CAMHS for children presenting with significant mental health difficulties

5.4. Intervention Programmes
5.4.1. Our school is able to offer a range of interventions across Tier 1, Tier 2 and Tier 3. Below are some examples of provision that can be put into place:

- Nurture Group (Year 2)
- Lego based therapy group
- School Art therapist
- Resilience programmes (linked to EFS)
- Forest schools
- CAMHS I-Reach programme
- Well-being groups