

Whitstable Junior School

Positive Mental Health Policy

Governors' Committee Responsible: Curriculum Committee

Policy Originator: AHT / SENCO

Status: Non-statutory

Review Period: Every 3 years

Date approved:

Next review date: February 2027

Signed: _____ **Chair of Governors**

Signed: _____ **Headteacher**

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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 Whitstable Junior School, we aim to promote positive mental health for every member of our staff and our children. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable children.

The school received the Carnegie Centre of Mental Health in Schools Award in February 2021 at the silver level which is testament to the effective practice and provision in place that promotes the emotional wellbeing and mental health of both staff and children.

With this award we will demonstrate that we are committed to:

- Promoting mental health as part of school life
- Improving the emotional wellbeing of our staff and children
- Ensuring mental health problems are identified early and appropriate support provided
- Offering provision and interventions that matches the needs of our children and staff
- Engaging the whole-school community in importance of mental health awareness
- Capturing the views of parents, carers, children and staff on mental health issues

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 children affected both directly and indirectly by mental ill health.

When children and young people have good levels of wellbeing it helps them to:

- learn and explore the world
- feel, express and manage positive and negative emotions
- form and maintain good relationships with others
- cope with, and manage, change, setbacks and uncertainty
- develop and thrive.

When children and young people look after their mental health and develop their coping skills it can help them to boost their resilience, self-esteem and confidence. It can also help them learn to manage their emotions, feel calm, and engage positively with their education - which can, in turn, improve their academic attainment. (Mentally Healthy Schools 2024)

Aims

This document describes Whitstable Junior 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, but not limited to, the following policies:

- Safeguarding Policy
- Teaching and Learning Policy
- Attendance Policy
- SEND Policy
- Behaviour policy

The Policy Aims to:

- Promote positive mental health in all staff and children
- 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 children suffering mental ill health and their peers and parents or carers

Legislation and guidance

This policy was written with regard to:

- The Equality Act 2010
- The Data Protection Act 2018
- Articles 3 and 23 of the UN Convention on the Rights of the Child

Roles and responsibilities

All staff are responsible for promoting positive mental health and wellbeing across our school and for understanding risk factors. If any members of staff are concerned about a pupil's mental health or wellbeing, they should inform the designated safeguarding lead (DSL)/mental health lead – Ms K Collin.

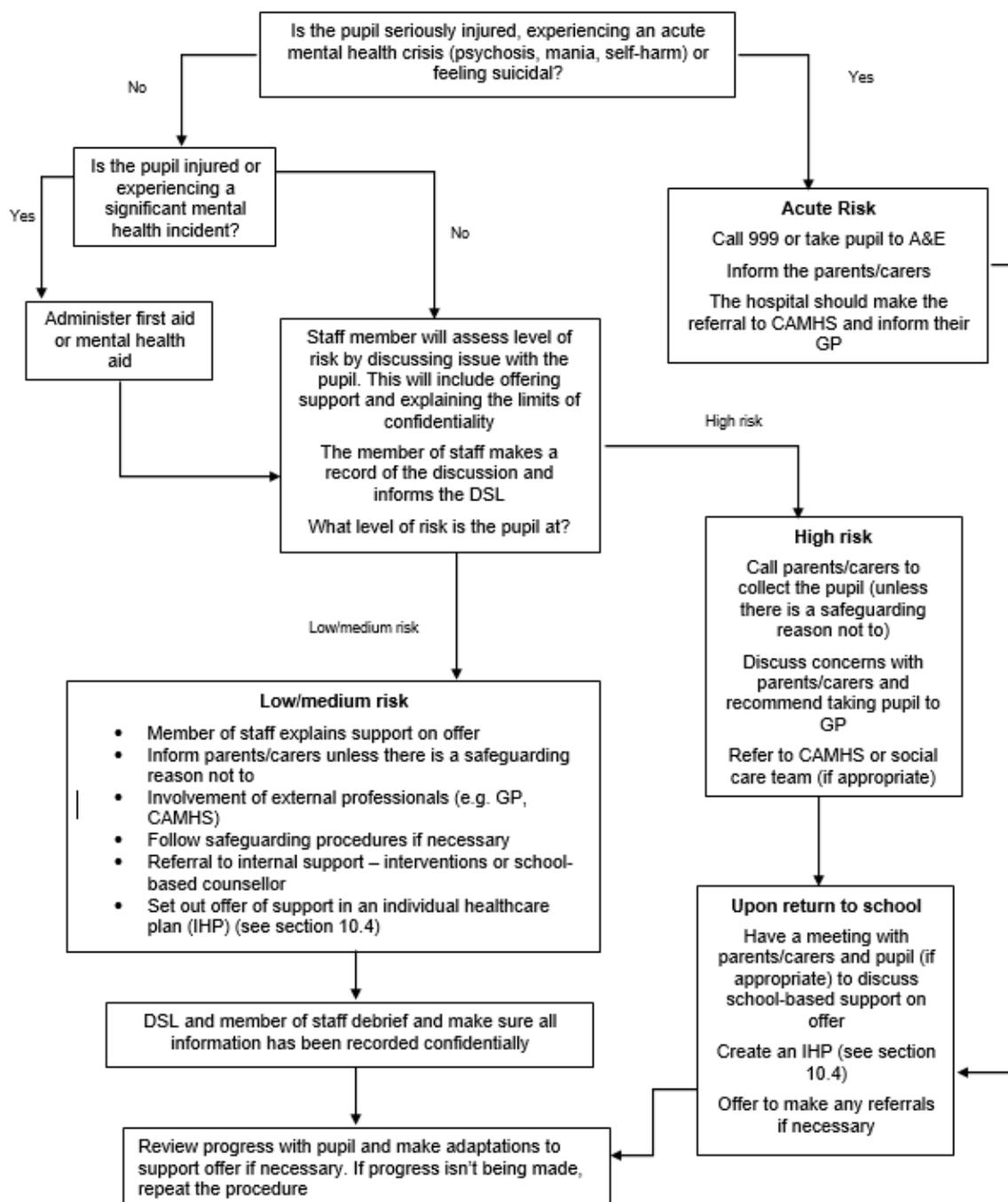
Certain members of staff have extra duties to lead on mental health and wellbeing in school. These members of staff include:

- Ms Sarah Kent – Headteacher, deputy DSL
- Ms Kirsten Collin - Assistant headteacher/designated Safeguarding Lead/SENCo/Mental Health Lead
- Mrs Kate Roy - Assistant headteacher/deputy DSL
- Leanne Barlow - Well-being Mentor
- Nicola Checksfield – Well-being Assistant

Any member of staff who is concerned about the mental health or wellbeing of a child should speak to the Mental Health Lead in the first instance and record their concerns on CPOMS. If there is a fear that the child is in danger of immediate harm then the normal child protection procedures should be followed. If the child 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.

Where a referral to School Health or CAMHS is appropriate, this will be led and managed by Ms Kirsten Collin (SENCo).

Procedure to follow in a case of acute mental health crisis:



Individual Care Plans

The school may decide to draw up Individual care plan for children causing concern or who receive a diagnosis pertaining to their mental health. This must be drawn up involving the student, the parents, carers and guardians and relevant health professionals.

This can include:

- Details of a child'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

Strategies to enhance self-esteem/promote social and emotional wellbeing

Our Well Being Team offers:

Well Being Mentors (WBM') offer support based on a therapeutic model. This may include:

- 1:1 support within class, but time limited
- An agreed period of time withdrawn from class – one off or a planned programme e.g. friendship groups, anger management, social skills, self-esteem, restorative work
- Light touch – child returns to class after given time limit to be successful
- WBM makes brief return visits to reinforce
- Short de-briefing takes place between WBM & teacher
- Small group/paired work on a set target/focus e.g. social skills, Emotional Literacy
- Being an advocate – meeting children at the gate, sharing success with parents & other staff – catching them being good!
- Rapid response team – responding to inappropriate behaviour
- Offering structured support for breaks/lunch times
- Games Zone—structured supervised play at lunch
- Play Therapy - limited access dependent on priorities.
- Playground Buddies scheme training & development
- Family support
- Bereavement support
- Support with issues around attendance

Our Wellbeing Team can also access support from a range of outside agencies including:

- Early Help, to support parents & families
- Young Healthy Minds—working with older children
- Rising Sun—domestic abuse
- Food bank
- CHAC
- Umbrella Centre Whitstable—holiday clubs
- Spurgeon Family support
- Solihull parent support

Teaching about Mental Health

The skills, knowledge and understanding needed by our children to keep themselves and others physically and mentally healthy and safe are included as part of our developmental PSHE curriculum.

The specific content of lessons will be determined by the specific needs of the cohort we're teaching but there will always be an emphasis on enabling children to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

Pupils are taught to:

- Develop healthy coping strategies
- Challenge misconceptions around mental health
- Understand their own emotional state
- Keep themselves safe

For more information, see our PSHE curriculum

We will also recognise and celebrate national and world mental health awareness days.

Staff will create an open culture around mental health by:

- Discussing mental health with pupils in order to break down stigma
- Encouraging pupils to disclose when their mental health is deteriorating

Signposting

We will ensure that staff, children and parents are aware of sources of support within school and in the local community. We have a designated Mental Health area on our school website. Here, parents are able to find current information regarding mental health and where to find support.

We will regularly highlight sources of support to children within relevant parts of the curriculum and in other presentations and assemblies. Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring children 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 child 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 The Well-Being Team and the DSL and by recording concerns on CPOMS

Possible warning signs include:

Changes in:

- Mood or energy level
- Eating or sleeping patterns
- Attitude in lessons or academic attainment
- Level of personal hygiene
- Social isolation
- Poor attendance or punctuality
- Expressing feelings of hopelessness, anxiety, worthlessness or feeling like a failure
- Abuse of drugs or alcohol
- Rapid weight loss or gain
- Secretive behaviour
- Covering parts of the body that they wouldn't have previously
- Refusing to participate in P.E. or being secretive when changing clothes
- Physical pain or nausea with no obvious cause
- Physical injuries that appear to be self-inflicted
- Talking or joking about self-harm or suicide

Managing disclosures

If a pupil makes a disclosure about themselves or a peer to a member of staff, staff should remain calm, non-judgmental and reassuring.

Staff will focus on the pupil's emotional and physical safety, rather than trying to find out why they are feeling that way or offering advice.

Staff will always follow our school's safeguarding policy and pass on all concerns to the DSL/mental health lead – Ms K Collin. All disclosures will be recorded on CPOMS

Confidentiality

Staff will not promise a pupil that they will keep a disclosure secret – instead they will be upfront about the limits of confidentiality.

A disclosure cannot be kept secret because:

- Being the sole person responsible for a pupil's mental health could have a negative impact on the member of staff's own mental health and wellbeing

- The support put in place for the pupil will be dependent on the member of staff being at school
- Other staff members can share ideas on how to best support the pupil in question

Staff should always share disclosures with the DSL. If information needs to be shared with other members of staff or external professionals, it will be done on a need-to-know basis.

Parents/carers will be informed unless there is a child protection concern. In this case the Child protection/ safeguarding policy will be followed.

Managing Expectations

Mental health issues can be ongoing for a long time. They can influence a child's ability to access learning. We need to ensure that all members of staff are familiar with children who are suffering from mental health and provide information that helps manage expectations of affected children in order to ensure those children are not placed under undue stress which may exacerbate their mental health issues. In addition to the Well-Being Team, teachers will play a significant part in monitoring these identified children, taking a holistic approach which may include considering issues addressing:

- Academic achievement
- Absence and lateness
- Access to extra-curricular activities including sport
- Duration and pace of recovery
- Ability to interact and engage within lessons

Where a mental health issue is affecting attendance, school leaders will refer to guidance from the DFE in the following document

https://assets.publishing.service.gov.uk/media/63ee20a3d3bf7f62e5f76ba4/Summary_of_responsibilities_where_a_mental_health_issue_is_affecting_attendance.pdf

Working with 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:

We will work with parents/carers to support pupils' mental health by:

- Asking parents/carers to inform us of any mental health needs their child is experiencing, so we can offer the right support
- Informing parents/carers of mental health concerns that we have about their child

- Engaging with parents/carers to understand their mental health and wellbeing issues, as well as that of their child, and support them accordingly to make sure there is holistic support for them and their child
- Highlighting sources of information and support about mental health and wellbeing on our school website, including the mental health and wellbeing policy
- Liaising with parents/carers to discuss strategies that can help promote positive mental health in their child
- Providing guidance to parents/carers on navigating and accessing relevant local mental health services or other sources of support (e.g. parent/carer forums)
- Keeping parents/carers informed about the mental health topics their child is learning about in PSHE, and share ideas for extending and exploring this learning at home

When informing parents/carers about any mental health concerns we have about their child, we will endeavour to do this face-to-face.

These meetings can be difficult, so our school will ensure that parents/carers are given time to reflect on what has been discussed, and that lines of communication are kept open at the end of the meeting.

A record of what was discussed, and action plans agreed upon in the meeting will be recorded and added to the pupil's confidential record.

If appropriate, an individual healthcare plan (IHP) will be created in collaboration with parents/carers

Supporting Peers

When a child 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 with the child 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 or saying which may inadvertently cause upset
- Warning signs that their friend may need 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

Staff 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 to enable them to keep children 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 children.

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.

Support for staff

We recognise that supporting a pupil experiencing poor mental health can affect that staff member's own mental health and wellbeing. To help with this we will:

- Treat mental health concerns seriously
- Offer staff supervision sessions, if deemed required
- Support staff experiencing poor mental health themselves
- Create a pleasant and supportive work environment
- Signpost staff to KELSI confidential support line - <https://www.kelsi.org.uk/hr-information-and-guidance-for-kent-maintained-schools/information-for-staff-in-kent-maintained-schools/staff-counselling>

Further Information and Sources of Support about Common Mental Health Issues

Prevalence of Mental Health and Emotional Wellbeing Issues:

- More than one in 10 primary school children aged five to 10 has an identifiable mental health condition – that's around three children in every class.
- While rates of mental ill health do increase as children get older, early intervention is key to giving young people the best start in life.
- Primary schools have a vital role to play in supporting children's mental health – teaching them the skills they need to recognise and deal with their emotions, and helping those with difficulties get the support they need.
- Between 1 in every 12 and 1 in 15 children and young people deliberately self-harm.
- There has been a big increase in the number of young people being admitted to hospital because of self-harm. Over the last ten years this figure has increased by 68%.
- More than half of all adults with mental health problems were diagnosed in childhood. Less than half were treated appropriately at the time.
- Nearly 80,000 children and young people suffer from severe depression.
- The number of young people aged 15-16 with depression nearly doubled between the 1980s and the 2000s.
- Over 8,000 children aged under 10 years old suffer from severe depression.

- 3.3% or about 290,000 children and young people have an anxiety disorder.
- 72% of children in care have behavioural or emotional problems - these are some of the most vulnerable people in our society.

Below, we have sign-posted information and guidance about the issues most commonly seen in school-aged children. The links will take you through to the most relevant page of the listed website. Some pages are aimed primarily at parents, carers and guardians but they are listed here because we think they are useful for school staff too.

Types of Mental Health

Self-Harm

Self-harm describes any behaviour where a child causes harm to themselves in order to cope with thoughts, feelings or experiences they are not able to manage in any other way. It most frequently takes the form of cutting, burning or non-lethal overdoses in adolescents, while younger children and children with special needs are more likely to pick or scratch at wounds, pull out their hair or bang or bruise themselves. Online support includes:

<https://www.nspcc.org.uk/keeping-children-safe/childrens-mental-health/self-harm/>

<https://www.youngminds.org.uk/parent/parents-a-z-mental-health-guide/self-harm/>

Depression

Ups and downs are a normal part of life for all of us, but for someone who is suffering from depression these ups and downs may be more extreme. Feelings of failure, hopelessness, numbness or sadness may invade their day-to-day life over an extended period of weeks or months, and have a significant impact on their behaviour and ability and motivation to engage in day-to-day activities. Online support includes:

<https://www.youngminds.org.uk/parent/parents-a-z-mental-health-guide/depression-and-low-mood/>

Anxiety, Panic Attacks and Phobias

Anxiety can take many forms in children and young people, and it is something that each of us experiences at low levels as part of normal life. When thoughts of anxiety, fear or panic are repeatedly present over several weeks or months and/or they are beginning to impact on a young person's ability to access or enjoy day-to-day life, intervention is needed. Online support include: www.anxietyuk.org.uk/

Obsessions and Compulsions

Obsessions describe intrusive thoughts or feelings that enter our minds which are disturbing or upsetting; compulsions are the behaviours we carry out in order to manage those thoughts or feelings. For example, a child may be constantly worried that their house will

burn down if they don't turn off all switches before leaving the house. They may respond to these thoughts by repeatedly checking switches, perhaps returning home several times to do so. Obsessive compulsive disorder (OCD) can take many forms – it is not just about cleaning and checking. Online support includes: www.ocduk.org/ocd/

Suicidal Feelings

Children may experience complicated thoughts and feelings about wanting to end their own lives. Some young people never act on these feelings though they may openly discuss and explore them, while other children die suddenly from suicide apparently out of the blue. Online support include: www.papyrus-uk.org

<https://www.nspcc.org.uk/keeping-children-safe/childrens-mental-health/depression-anxiety-mental-health/>

Eating Problems

Food, weight and shape may be used as a way of coping with, or communicating about, difficult thoughts, feelings and behaviours that a child experiences day to day. Some children develop eating disorders such as anorexia (where food intake is restricted), binge eating disorder and bulimia nervosa (a cycle of bingeing and purging). Other children, particularly those of primary or preschool age, may develop problematic behaviours around food including refusing to eat in certain situations or with certain people. This can be a way of communicating messages the child does not have the words to convey. Online support includes: <https://www.beateatingdisorders.org.uk/>

Policy Review

This policy will be reviewed every 3 years as a minimum.

This policy will always be immediately updated to reflect personnel changes.

Approved by the GB on

Next review on **February 2027**