



DOROTHY BARLEY JUNIOR ACADEMY MENTAL HEALTH & EMOTIONAL WELL BEING POLICY

Other related policies: Anti-Bullying Policy
Safeguarding and Child Protection Policy
Attendance Policy
LAC Policy
All Inclusion Policies
All Staff/Pupil Well-Being Policies

Policy devised November 2018
Reviewed July 2023
Next Review: September 2025

1.0 INTRODUCTION & POLICY STATEMENT

At Dorothy Barley Junior Academy we are committed to promoting positive mental health and emotional wellbeing to all children, their families, members of staff and governors. Our open culture allows children's voices to be heard, and through the use of effective policies and procedures we ensure a safe and supportive environment for all affected - both directly and indirectly - by mental health issues.

2.0 SCOPE

This policy is a guide to all staff – including non-teaching and governors – in outlining Dorothy Barley Junior Academy's approach to promoting mental health and emotional wellbeing.

It should be read in conjunction with other relevant school policies.

3.0 POLICY AIMS

- Promote positive mental health and emotional wellbeing in all staff and children.
- Increase understanding and awareness of common mental health issues.
- Enable staff to identify and respond to early warning signs of mental ill health in children.
- Enable staff to understand how and when to access support when working with young people with mental health issues.
- Provide the right support to children with mental health issues, and know where to signpost them and their parents/carers for specific support.
- Develop resilience amongst children and raise awareness of resilience building techniques.
- Raise awareness amongst staff and gain recognition from SLT that staff may have mental health issues, and that they are supported in relation to looking after their wellbeing; instilling a culture of staff and children welfare where everyone is aware of signs and symptoms with effective signposting underpinned by behaviour and welfare around school.

4.0 KEY STAFF MEMBERS

This policy aims to ensure all staff take responsibility to promote the mental health of children; however key members of staff have specific roles to play:

- Pastoral/Welfare Staff/All Senior Leaders
- Designated Safeguarding Lead
- SENCO
- Mental Health First Aid Champion
- PSHCE Coordinator

If a member of staff is concerned about the mental health or wellbeing of a child, in the first instance they should speak to the Designated Safeguarding Leads/Inclusion Team.

If there is a concern that the child is high risk or in danger of immediate harm, the school's child protection procedures should be followed.

If the child presents a high risk medical emergency, relevant procedures should be followed, including involving the emergency services if necessary.

5.0 INDIVIDUAL CARE PLANS

When a child has been identified as having cause for concern, has received a diagnosis of a mental health issue, or is receiving support either through CAMHS or another organisation, it is recommended that an Individual Care Plan should be drawn up. The development of the plan should involve the child, parents, and relevant professionals.

Suggested elements of this plan include:

- Details of the child's situation/condition/diagnosis
- Special requirements or strategies, and necessary precautions
- Medication and any side effects
- Who to contact in an emergency
- The role the school and specific staff

6.0 TEACHING ABOUT MENTAL HEALTH

The skills, knowledge and understanding our children need to keep themselves - and others - physically and mentally healthy and safe are included as part of our PSHCE curriculum.

We will follow the guidance issued by the PSHE Association to prepare us to teach about mental health and emotional health safely and sensitively.

<https://www.pshe-association.org.uk/curriculum-and-resources/resources/guidance-preparing-teach-about-mental-health-and-emotional-wellbeing> incorporating this into our curriculum at all stages is a good opportunity to promote children's wellbeing through the development of healthy coping strategies and an understanding of children's own emotions as well as those of other people.

Additionally, we will use such lessons as a vehicle for providing children who do develop difficulties with strategies to keep themselves healthy and safe, as well as supporting children to support any of their friends who are facing challenges.

7.0 SIGNPOSTING

We will ensure that staff, children and parents/carers are aware of the support and services available to them, and how they can access these services.

Within the school (noticeboards) and through our communication channels (bulletin, website), we will share and display relevant information about local and national support services and events.

The aim of this is to ensure children understand:

- What help is available
- Who it is aimed at
- How to access it
- Why should they access it
- What is likely to happen next

8.0 SOURCES OF SUPPORT AT SCHOOL OR IN THE LOCAL COMMUNITY

8.1. School Based Support – At Dorothy Barley Junior Academy we offer the following to all children:

Pupil Welfare Team

Touchpoints

Pupil Well Being Monitoring Forms

Behaviour Support Plans

Care Plans

THRIVE

Restorative Justice work

Peer Mediation

School Councillor

Mental Health First Aid Champion (trained in YMHFA)

Referrals to outside agencies offering specialist support e.g. CAMHS, Young Carers, Sycamore Trust, School Nursing Team

All of the above can be accessed via referral/request to the Inclusion/Pupil Welfare Team.

8.2 LOCAL SUPPORT

There are a range of organisations and groups offering support, including the **CAMHS partnership**, a group of providers specialising in children and young people's mental health wellbeing. These partners deliver accessible support to children, young people and their families, whilst working with professionals to reduce the range of mental health issues through prevention, intervention, training and participation.

9.0 WARNING SIGNS

- 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 alert the Mental Health First Aid Champion and/or Pupil Welfare Team/Designated Safeguarding Lead

Possible warning signs, which all staff should be aware of 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

10.0 TARGETED SUPPORT

We recognise some children and young people are at greater risk of experiencing poorer mental health. For example, those who are in care, young carers, those who have had previous access to CAMHS, those living with parents/carers with a mental illness and those living in households experiencing domestic violence.

We ensure timely and effective identification of children who would benefit from targeted support and ensure appropriate referral to support services by:

- Providing specific help for those children most at risk (or already showing signs) of social, emotional, and behavioural problems;
- Working closely with the London Borough of Barking & Dagenham Children's Services, local CAMHS and other agencies services to follow various protocols including assessment and referral;
- Discussing options for tackling these problems with the child and their parents/carers. Agree an Individual Care plan as the first stage of a 'stepped care' approach;
- Providing a range of interventions that have been proven to be effective,
- Ensure young people have access to pastoral care and support, as well as specialist services, including LBBD CAMHS, so that emotional, social and behavioural problems can be dealt with as soon as they occur;
- Provide children with clear and consistent information about the opportunities available for them to discuss personal issues and emotional concerns. Any support offered should take account of local community and education policies and protocols regarding confidentiality;

- Provide children with opportunities to build relationships, particularly those who may find it difficult to seek support when they need it; and
- The identification, assessment, and support of young carers under the statutory duties outlined in the Children & Families Act 2014.

11.0 MANAGING DISCLOSURES

If a child chooses to disclose concerns about themselves, or a friend, to any member of staff, the response will be calm, supportive and non-judgemental.

All disclosures should be recorded confidentially on the child's personal file, including:

- Date
- Name of member of staff to whom the disclosure was made
- Nature of the disclosure & main points from the conversation
- Agreed next steps

This information will be shared with the Designated Safeguarding Lead using school procedures e.g. the Cause for Concern Form.

12.0 CONFIDENTIALITY

If a member of staff feels it is necessary to pass on concerns about a child to either someone within the school this will be first discussed with the child. We will tell them:

- Who we are going to tell
- What we are going to tell them
- Why we need to tell them
- When we're going to tell them

It is important to also safeguard staff emotional wellbeing. By sharing disclosures with a colleague this ensures one single member of staff is not solely responsible for the children. This also ensures continuity of care should staff absence occur and provides opportunities for ideas and support.

If a child gives us reason to believe that they are at risk, or there are child protection issues, parents should not be informed, but the child protection procedures should be followed.

13.0 WHOLE SCHOOL APPROACHES

13.1 Working with parents/carers

If it is deemed appropriate to inform parents there are questions to consider first:

- Can we meet with the parents/carers face-to-face?
- Where should the meeting take place – some parents are uncomfortable in school premises so consider a neutral venue if appropriate.
- Who should be present – children, staff, parents etc.?
- What are the aims of the meeting and expected outcomes?

We are mindful that for a parent, hearing about their child's issues can be upsetting and distressing. They may therefore respond in various ways which we should be prepared for and allow time for the parent to reflect and come to terms with the situation.

Ensure a record of the meeting and points discussed/agreed are added to the pupil's record and an Individual Care Plan created if appropriate.

13.2 Supporting parents

We recognise the family plays a key role in influencing children and young people's emotional health and wellbeing; we will work in partnership with parents and carers to promote emotional health and wellbeing by:

- Ensuring all parents are aware of and have access to promoting social and emotional wellbeing and preventing mental health problems;
- Highlighting sources of information and support about common mental health issues through our communication channels (website, bulletin etc.);
- Offering support to help parents or carers develop their parenting skills. This may involve providing information or offering small, group-based programmes run by community nurses (such as school nurses and health visitors) or other appropriately trained health or education practitioners; and
- Ensuring parents, carers and other family members living in disadvantaged circumstances are given the support they need to participate fully in activities to promote social and emotional wellbeing. This will include support to participate in any parenting sessions, by offering a range of times for the sessions or providing help with transport and childcare. We recognise this might involve liaison with family support agencies.

14.0 TRAINING

As a minimum, key 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. A nominated member of staff will receive professional Mental Health First Aid training or equivalent. Key staff will also disseminate key learning points with the rest of the staff as part of the yearly safeguarding training offer.

We will host relevant information on our website for staff who wish to learn more about mental health. The MindEd learning portal www.minded.org.uk provides free online training suitable for staff wishing to know more about a specific issue.

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.

Suggestions for individual, group or whole school CPD should be discussed with **the Inclusion Team** who can also highlight sources of relevant training and support for individuals as needed.

15.0 POLICY REVIEW

This policy will be reviewed every two years as a minimum. The next review date is **September 2025**

In between updates, the policy will be updated when necessary to reflect local and national changes. This is the responsibility of **Senior Leadership/Inclusion Team**.