



**White Spire School**  
**Mental Health and Wellbeing Policy**

Date: Jan 2018

Review Date: Jan 2019

**1. KEY CONTACTS in school/setting**

**Headteacher / Deputy designated safeguarding lead:**

Name: Finlay Douglas

**Senior designated safeguarding lead:**

Name: Michelle Bartle

**Members of safeguarding team:**

Name: Phil Wilson

Name: Katy Cozens

Name: Shams Sharples

Name: Sophie Lunnon

**Designated governor for safeguarding:**

Name: Derek Stanley

**Safeguarding link governor:**

Name: Carol Fordham

**Designated Mental Health and Wellbeing Lead/Teacher**

Name: Michelle Bartle

**Nominated Mental Health and Wellbeing Governor**

Name: Derek Stanley

**PSHCE Lead**

Name: Laura Halsey



## **Introduction**

At White Spire School, we believe that we as a school have an important role to play by acting as a source of support and information for pupils, guardians and staff.

*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 his or her community. (World Health Organisation).*

At our school, we aim to promote positive mental health for every member of our staff and pupil body. In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for pupils affected both directly and indirectly by mental ill health.

This policy is to be read in conjunction with

- Child protection policy

## **This policy aims to**

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

## **Teaching about mental health**

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

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



## **Interventions**

We will ensure that staff, pupils and parents are aware of sources of support within school and in the local community.

Whenever we highlight sources of support, we will increase the chance of pupils seeking help by ensuring pupils 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**

There are often warning signs which indicate a child or young person is experiencing mental health or emotional well-being issues. These warning signs are taken seriously and staff observing any of them should communicate their concerns following the schools child protection procedures.

While not exhaustive, the list below details possible warning signs as follows:

- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating or sleeping habits
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood
- 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
- Unusual play (in playground)
- Unusual drawings (in class)
- Tendency to isolate themselves
- Compulsive lying
- Attention seeking
- Pulling hair out (self-harm)
- Hurting other children
- No empathy
- Anxiety
- Hiding inside clothes (making self invisible)
- Loud and disruptive



- Hiding lunch
- Soiling

### **Managing disclosures**

A child or young person may choose to disclose concerns about themselves or a friend/sibling to any member of staff. If such disclosure occurs, staff are to follow the schools child protection procedures.

### **Information Sharing and Confidentiality**

All staff are aware that they must not promise to keep 'secrets' with children. When a concern is passed on, pupils are to be made aware of whom the information has been passed onto.

### **Working with parents and carers**

Where it is considered appropriate to inform parents / carers of a disclosure, staff will always seek to be sensitive in our approach.

As it can be difficult to 'take in' information while coming to terms with unexpected news, the school will provide parents with leaflets/information to take away in addition to highlighting sources of further support aimed specifically at parents - e.g. Parent helplines and forums.

The school will provide a contact point for parents if they have further questions and will consider booking in a follow-up meeting or phone call as parents often have many questions.

### **Training**

As a minimum, all staff will receive regular training about recognising and responding to mental health issues to enable them to keep child or young person safe.

### **Policy Review**

The governing body is responsible for reviewing this policy annually and ensuring that it is compliant with current legislation and good practice. Also for ensuring that the school maintains an up to date list of key contacts and related policy and procedures are kept up to date.



## Appendix

### **Self-harm**

Self-harm describes any behaviour where a young person 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 young people with special needs are more likely to pick or scratch at wounds, pull out their hair or bang or bruise themselves.

[SelfHarm.co.uk](http://SelfHarm.co.uk):

### **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.

[Depression Alliance: www.depressionalliance.org/information/what-depression](http://www.depressionalliance.org/information/what-depression)

### **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.

[Anxiety UK: www.anxietyuk.org.uk](http://www.anxietyuk.org.uk)

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 young person 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.

[OCD UK: www.ocduk.org/ocd](http://www.ocduk.org/ocd)

### **Suicidal feelings**

Young people 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 young people die suddenly from suicide apparently out of the blue.

[Prevention of young suicide UK - PAPHYRUS: www.papyrus-uk.org](http://www.papyrus-uk.org)



### **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 young person experiences day to day. Some young people develop eating disorders such as anorexia (where food intake is restricted), binge eating disorder and bulimia nervosa (a cycle of bingeing and purging). Other young people, particularly those of primary or pre-school 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.

Beat - the eating disorders charity: [www.b-eat.co.uk/about-eating-disorders](http://www.b-eat.co.uk/about-eating-disorders)

Eating Difficulties in Younger Children and when to worry: [www.inourhands.com/eating-difficulties-in-younger-children](http://www.inourhands.com/eating-difficulties-in-younger-children)



## Appendix B: Guidance and advice documents

[Supporting Mental Health in Schools and Colleges](#) - Department for Education (2017)

[Promoting children and young people's emotional health and wellbeing](#) - Public Health England (2015)

[Mental health and behaviour in schools](#) - departmental advice for school staff. Department for Education (2016)

[Counselling in schools: a blueprint for the future](#) - departmental - advice for school staff and counsellors. Department for Education (2017)

[Teacher Guidance: Preparing to teach about mental health and emotional wellbeing](#) (2015). PSHE Association. Funded by the Department for Education (2015)

[Keeping children safe in education](#) - statutory guidance for schools - and colleges. Department for Education (2016)

[Supporting pupils at school with medical conditions](#) - statutory guidance for governing bodies of maintained schools and proprietors of academies in England. Department for Education (2017)

[Healthy child programme from 5 to 19 years old](#) - is a recommended framework of universal and progressive services for children and young people to promote optimal health and wellbeing. Department of Health (2009)

[Future in mind - promoting, protecting and improving our children and young people's mental health and wellbeing](#) - a report produced by the Children and Young People's Mental Health and Wellbeing Taskforce to examine how to improve mental health services for children and young people. Department of Health (2015)