**BEWSEY LODGE PRIMARY SCHOOL**



**MENTAL HEALTH POLICY**

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| Date of implementation | August 2022 |
| Date of Review | August 2025 |

**Our safeguarding mission statement.**

Our mission is to ensure that all children and adults are safe from harm at all times and can thrive in an environment which is secure and free from abuse or bullying of any kind.

We work hard in creating a welcoming atmosphere, which develops the social and emotional needs of everyone; supporting, questioning, loving. At our school people are nurtured, valued and treated equally. Worries, concerns and thoughts are listened to and addressed in an environment of mutual respect.

At our school we are proud to feel:

**SAFE SECURE LOVED**

**Policy Intent**

At Bewsey Lodge Primary School, we are committed to promoting positive mental health and emotional wellbeing to all children, their families and members of staff and governors. Our open culture allows pupils’ voices to be heard, and using effective policies and procedures we ensure a safe and supportive environment for all affected, both directly and indirectly, by mental health issues.

This policy is a guide to all staff, including non-teaching and governors, outlining Bewsey Lodge Primary School’s approach to promoting mental health and emotional wellbeing. It should be read in conjunction with our safeguarding suite of policies.

**At Bewsey Lodge we understand that:**

*Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem.*

**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 sign-post them and their parents/carers for specific support.
* Develop resilience amongst children and raise awareness of resilience building techniques.
* Instil a culture of staff and children’s welfare where everyone is aware of signs and symptoms, with effective signposting underpinned by behaviour and welfare around school.

If a member of staff is concerned about the mental health or wellbeing of a child, in the first instance they should speak to Mrs Bailey, the Designated Senior Lead for Safeguarding (DSL) or Mrs Price, the Deputy DSL (Mrs Bailey is also the Special Educational Needs Co-ordinator). 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.

**Signposting**

We ensure that staff, children and parents/carers are aware of the support and services available to them, and how they can access these services. Through our website, newsletters, notice boards and Facebook page, we share and display relevant information about local and national support services and events.

**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 PSHE/JIGSAW curriculum. Additionally, we will use such lessons to provide 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.

**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 DSL/Deputy DSL. 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.
* Avoiding PE or getting changed secretively.
* Lateness to, or absence from school.
* Repeated physical pain or nausea with no evident cause.
* An increase in lateness or absenteeism.

*This list is not exhaustive*

**Support at School**

Support is available for all children but we recognise those who are at greater risk to mental health issues. These include children who are:

* Going through difficulties such as family illness, separation, bereavement, or other stressful situations.
* Those who are in care.
* Young carers.
* Those who have had previous access to CAMHS.
* Those living with parents/carers with a mental illness.
* Those living in households experiencing domestic violence.

*This list is not exhaustive*

We identify any children who may need extra support through:

* Observations.
* Conversations with children/parents.
* Attendance/punctuality.
* Drop ins for parents.
* Talk Time.
* Early Help Assessments (EHA); these are completed by the DSL/Deputy DSL or Mrs Jones, EHA support.
* Multi-agency meetings.
* Worry monsters in every class.

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

* Identifying children who are showing early signs of anxiety, emotional distress, or behavioural problems.
* Providing specific support/interventions for those children most at risk (or already showing signs) of social, emotional, and behavioural problems.
* Working with Children’s Services, CAMHS and other agencies services to follow protocols including assessment and referral.
* Discussing options for tackling these problems with the child and their parents/carers.
* Agreeing an Individual Care Plan/Support Plan/Individual Education Plan, if appropriate.
* Provide children with clear and consistent information about the opportunities available for them to discuss personal issues and emotional concerns.
* Provide children with opportunities to build relationships, particularly those who may find it difficult to seek support when they need it.

**Support includes:**

* The content of the curriculum.
* The school ethos, which promotes a positive, supportive and secure environment and gives pupils a sense of being valued.
* ‘Drop in’ sessions for children (Talk Time) and parents/carers.
* Ensuring that children and parents/carers know who to speak to if they have any worries.
* The school’s Positive Behaviour Policy, which is aimed at supporting vulnerable pupils in the school.
* Worry Monsters, where worries can be written or drawn.
* Children’s How to Stay Safe Policy.
* Access to our Designated Provisions.
* 1:1/small groups interventions to support social, emotional and mental health needs.
* Ensuring that children know that some behaviour is unacceptable, but they are valued and are not to be blamed for any abuse, which has occurred.
* Liaising with other agencies, which support the child.
* Offering support with attendance and punctuality.
* Completing/contributing to the EHA process.
* Attending/leading multi-agency meetings.

**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 a Health/Care Plan should be drawn up. The development of the plan should involve the pupil, parents, and relevant professionals.

**This plan should 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 of the school and specific staff.

**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 will be recorded confidentially on a Child Protection Initial Concern Form (available from the staff room).

Parents would be informed if concerns are raised about a child’s mental health. 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.

**Whole school approach to working with parents/carers**

We are mindful that for a parent/carer, hearing concerns about their child can be upsetting and distressing. They may therefore respond in various ways which we should be prepared for and allow time for the parent/carer to reflect and process the situation.

Signposting parents/carers to other sources of information and support can be helpful in these instances. Lines of communication will be kept open should the parents/carers have further questions or concerns.

**Supporting Parents**

We recognise the family plays a key role in influencing children and young people’s emotional health and wellbeing; we work in partnership with parents/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, newsletters, notice boards, school Facebook page etc.).
* Offering support to help parents or carers to develop their parenting skills.
* 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.

**Supporting Peers**

When a child is suffering from mental health issues, it can be a difficult time for their friends who may want to support but do not know how. To keep peers safe, we will consider on a case-by-case basis which children may need additional support. Support will be provided in one to one or group settings and will be guided by conversations by the child who is suffering and their parents/carers 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 / saying which may inadvertently cause upset.
* Warning signs that their friend needs help.

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 have received regular training about recognising and responding to mental health issues as part of their regular safeguarding training to enable them to keep pupils 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.

**Tiered Approach for Supporting Mental Health**

**Urgent Care**

999 call/CAMHS

Emergency parental

contact

**External Support**

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SENCO/DDSL referral to external agencies such as: CAHMS, St Joseph’s, Play therapist, Parental involvement Regular review meetings such as; TAF (Team around the family) TAC (Team around the child)

**Initial**

**Intervention**

Class teacher refer to Mental Health Lead for:

* 1:1/small group work with Mr Riley
* 1:1/small group work with Mental Health Practitioner
* 1:1/small group work with ELSA

Parental involvement

**Whole School Mental Health Support**

Weekly Jigsaw lessons Time to Talk Restorative conversations Journals Time out cards

TA led interventions Playground PALS

School Charter

Worry Monsters

Monitoring of pupil’s day to day wellbeing via presentation in school

Parental involvement Emotion ‘check ins’

Time to

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School to follow up with parents following

urgent medical intervention. Follow

Safeguarding and Child Protection Policy

and Procedure.

Involve Children’s Social

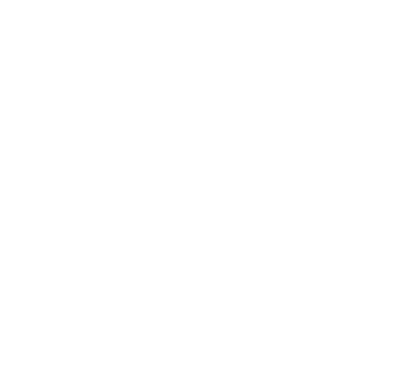
Care Services.

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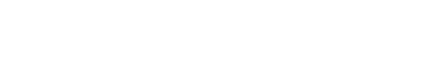
CPOMS used to record concerns and actions.

Regular liaisons with Mental Health Team and class teachers/TAs.



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Interim measures are to be put in place and recorded on provision maps by class teacher whilst waiting lists are held. Support for these can be provided by the Mental Health Team.



**Local**

* Mind Works drop-ins

The Hub, Capesthorne Road Orford, on Thursdays from 9.00am to 11.00am

Great Sankey Children’s Centre, Liverpool Road, on Tuesdays from 3.00pm to 5.00pm

* [Happy OK Sad (warrington.gov.uk)](https://happyoksad.warrington.gov.uk/) a website with links to information about mental health and local mental health services
* Chat Health Warrington - [chathealth.nhs.uk](https://chathealth.nhs.uk/%20)
* Stay Alive App – for anyone who feels suicidal
* In your corner- local mental health resources for young people

**National**

* [www.youngminds.org.uk](http://www.youngminds.org.uk)
* [Mind](https://www.mind.org.uk/information-support/for-children-and-young-people/useful-contacts/)
* Childline
* Beat – eating disorders
* Hope again – bereavement
* Mermaid – LGBTQ+
* Rollercoaster Parent Support Group for parents on facebook

**Staff Mental Health**

We recognise that anyone can experience mental health issues for various reasons which may be out of their control. There may also be work related factors that could contribute to poor mental health such as work life imbalance, workload pressure, poor working conditions. To every extent possible, we aim to recognise and address cases of workplace pressures that contribute to mental health issues.

We aim to:

* Treat staff mental illness seriously.
* Proactively support resolution of issues causing concern.
* Support staff members who face mental health problems.
* Create pleasant workplaces.
* Encourage communication.
* Safeguarding supervisions for staff working directly with vulnerable families.

For further information, please see out Staff Well-Being Policy.