



# Richard Lander School

## Positive Mental Health Policy

Policy Effective From: September 2024

Responsibility: Head/Deputy Head/Governing Body

Reviewed and monitored by: Head/Deputy Head/Governing Body

Review Date: September 2025

This policy should be read in conjunction with the school's child protection and safeguarding policy.

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)

### **Introduction**

At our school, we aim to promote positive mental health for every member of our staff and student body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable students. In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. In an average classroom, 1 in 4 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 students affected both directly, and indirectly by mental ill health.

### **Aims and Scope of this Procedure**

Richard Lander School is committed to ensuring equality of opportunity for all who learn and work here. We believe that all forms of prejudice and discrimination are unacceptable and will strive to tackle these. Richard Lander School will offer advice and support for students with mental health difficulties and signpost to external agencies for continued support. Under the policy students will be encouraged to disclose any mental health difficulties in order that the correct level of support may be given.

The School's Mission is to "Be the best you can be, every moment counts". We are committed to providing an inclusive and equitable learning environment, in which diversity is welcomed, valued and celebrated, so that all our students fulfil their potential. We will continue to promote equality in all our activities, tackle discrimination, widen participation and increase social inclusion.

### **The Policy Aims to:**

- Promote positive mental health in all staff and students
- 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 students suffering mental ill health and their peers and parents/carers
- Provide support to staff suffering mental ill health signposting them to relevant support / agencies as required.

## **Lead Members of Staff**

Whilst all staff have a responsibility to promote the mental health of students. Staff with a specific, relevant remit include:

- Designated safeguarding leads
- Mental health lead
- Assistant Head teachers of KS3 / KS4 student support team
- 'TIS' ERWM (Emotional resilience wellbeing mentor#0
- Student Support Pastoral Managers
- Pupil Premium Effective Learning mentors

Any member of staff who is concerned about the mental health or the wellbeing of a student should speak to the Pastoral HOY in the first instance. If there is a fear that the student is in danger of immediate harm, then the normal child protection procedures should be followed with an immediate email or contact to one the designated safeguarding leads. If the student presents a medical emergency then the normal procedures for medical emergencies should be followed, including alerting the first aid staff, emergency services will be contacted if necessary. Where a referral to CAMHS is appropriate, this will be led and managed by the DSL / DDSL and or Pastoral managers.

## **Scope and Purpose**

### **Why do we need a specific positive mental health policy?**

- For regulatory and legal reasons to comply with the Equality Act 2010.
- To ensure equal access to education and to appropriate support for all, with the goal of best possible achievement of students.
- To establish procedures that safeguard the school community, give guidance regarding appropriate action and ensure accurate written records are kept.
- Because it is recognised that students can be vulnerable, we therefore have a duty of care to respond appropriately to situations where concerns are raised about a student. We will intervene if a student's state of health presents a risk, either to themselves or to others, or where this results in unreasonable demands being placed on staff, or that the teaching and learning environment is compromised so that we cannot ensure the health and safety of both the student concerned and those affected by the student. We may require a student to interrupt their studies, this would always be at the discretion of a member of SLT. Examples include, when a student's conduct

is presenting risks in how they behave and treat other people, how they function in managing their own health and safety and where this impacts on other learners, staff or members of the public. We do this in recognition that there may be underlying physical or mental health issues or substance misuse problems or difficult personal circumstances giving rise to or contributing to unacceptable conduct.

## **Individual Care Plans**

It is helpful to draw up an individual care plan for pupils causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the pupil, the parents and relevant health professionals. Reasonable adjustment in line with the DDA 1995 will be implemented as part of these plans to support students with a disability, these will be made with the support of the relevant external agencies and key professionals. Any assessment of the individual's needs will ensure that any provision or adjustment made will be beneficial for the student and possible for the School to deliver.

### **Individual Care Plans can include:**

- Details of a pupil'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

## **Teaching about Mental Health**

The skills, knowledge and understanding needed by our students to keep themselves and others physically and mentally healthy and safe are included as part of our PD curriculum, tutor programme and assembly schedule. 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 students to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others. As with all PD curriculum, tutor programme and assembly schedule, the curriculum is delivered in an age appropriate manner.

## **Signposting**

We will ensure that staff, students and parents are aware of sources of support within school and in the local community. What support is available within our school and local community, who it is aimed at and how to access it, as outlined in [Appendix A & B](#)

## **Warning Signs**

School staff may become aware of warning signs which indicate a student 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 Richard Holloway, our mental health and emotional wellbeing lead, Yvonne Rippon the DDSL or a member of the Student Support Team

**Possible warning signs 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

**Common mental health issues may include:**

- Anxiety disorders including: - PTSD- Post Traumatic Stress Disorder
- OCD- Obsessive Compulsive Disorder - Panic attacks
- Depression
- Stress
- Eating Disorders
- Disorders of personality and identity
- Psychosis- including Schizophrenia
- Bi-Polar
- Self-Harm
- Suicidal thoughts/ attempts

The needs and experiences of people with mental difficulties are individual to them. As a school we will endeavour to make it possible for people who experience mental difficulties to complete their education and play their full part in society whilst they are initially supported through school and then signposted or referred to external agencies.

**Managing disclosures**

A student may choose to disclose mental health concerns about themselves or a friend to any member of staff, so all staff need to know how to respond appropriately to a disclosure.

If a student chooses to disclose concerns about their own mental health or that of a friend to a member of staff, the member of staff's response should always be calm, supportive and non-judgemental. Staff should listen, rather than advise and our first thoughts should be of the student's emotional and physical safety rather than of exploring 'Why?' For more

information about how to handle mental health disclosures sensitively see the staff training section of Planet estream; Safeguarding.

All disclosures should be passed on to Richard Holloway our mental health and emotional wellbeing lead, or the DDSL (Yvonne Rippon) or a member of the Student Support Team who will offer support and advice about next steps. A referral for further support can then be considered.

## **Confidentiality**

We should be honest with regards to the issue of confidentiality. No adult must ever guarantee confidentiality to any individual including parents, children and colleagues. Staff should make children aware that if they disclose information that may be harmful to themselves or others, then certain actions will need to be taken. If we feel it is necessary for us to pass our concerns about a student on, then we should discuss with the student:

- Who we are going to talk to
- What we are going to tell them
- Why we need to tell them

Wherever possible, consent should be obtained before sharing personal information with third parties. In some circumstances, obtaining consent may not be possible or in the best interest of the child or young person, e.g., where safety and welfare of that child or young person necessitates that the information should be shared. The law permits the disclosure of confidential information necessary to safeguard a child or children. Disclosure should be justifiable in each case, according to the particular facts of the case, and legal advice should be sought if in doubt. If the information given relates directly to the safety and welfare of a child, then the DSL must be informed immediately. They should then contact MARU. Information on individual child protection cases may be shared by the designated lead (or deputy) with other relevant staff members. This will be on a 'need to know' basis only and where it is in the child's best interests to do so.

It is always advisable to share disclosures with a colleague, usually the mental health lead (Richard Holloway) this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the student, it ensures continuity of care in our absence and it provides an extra source of ideas and support. We should explain this to the student and discuss with them who it would be most appropriate and helpful to share this information with.

Students may choose to share information with their parents themselves. If this is the case, the student should be given 24 hours to discuss matters with their parents before the school makes contact. We should always give students the option of us informing parents for them or with them.

## **Working with Parents**

Where it is deemed appropriate to inform parents, we need to be sensitive in our approach. Before disclosing to parents, we should consider the following questions (on a case by case basis):

- Can the meeting happen face to face? This is preferable.
- Where should the meeting happen? At school, at their home or somewhere neutral?
- Who should be present? Consider parents, the student, other members of staff.
- What are the aims of the meeting?

It can be shocking and upsetting for parents to learn of their child's issues and many may respond with anger, fear or upset during the first conversation. We should be accepting of this (within reason) and give the parent time to reflect. We should always provide clear means of contacting us with further questions and consider booking in a follow up meeting or phone call right away as parents often have many questions as they process the information. Finish each meeting with agreed next step and always keep a brief record of the meeting on the child's confidential record.

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:

- Highlight sources of information and support about common mental health issues on our school website; <https://www.richardlander.co.uk/personalised-curriculum/special-needs-education/>
- Ensure that all parents are aware of who to talk to, and how to get about this, if they have concerns about their own child or a friend of their child
- Make our mental health policy and **SEMH provision map (Annex C)** easily accessible to parents
- Share ideas about how parents can support positive mental health in their children through our regular information evenings
- Keep parents informed about the mental health topics their children are learning about in PD and share ideas for extending and exploring this learning at home

## **Supporting Peers**

When a student 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 by the student 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 / saying which may inadvertently cause upset
- Warning signs that their friend help (e.g. signs of relapse)

**Additionally, we will want to highlight with peers:**

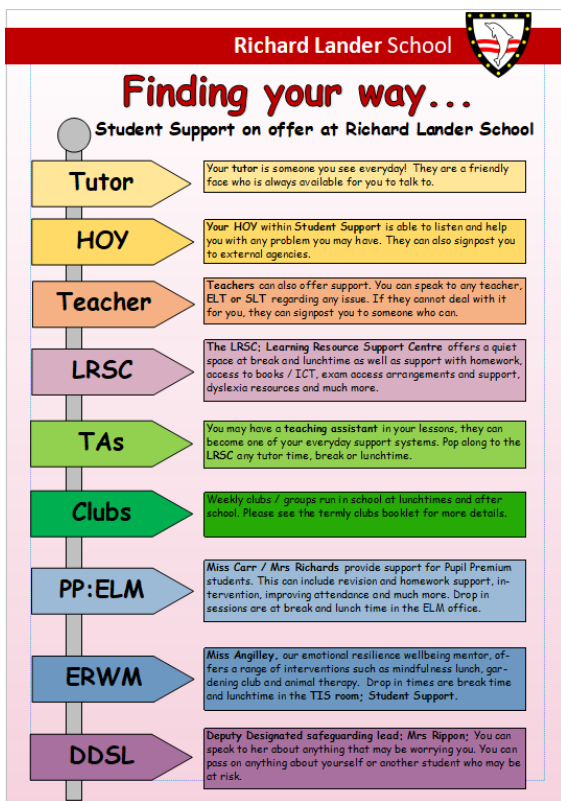
- Where and how to access support for themselves
- Safe sources of further information about their friend's condition
- Healthy ways of coping with the difficult emotions they may be feeling

## **Training**

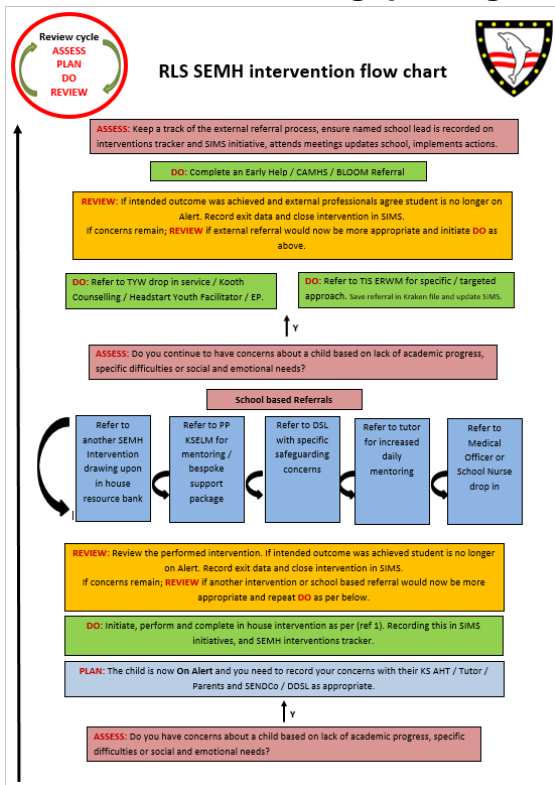
As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular child protection training in order to enable them to keep students safe.

We host relevant information on our website within the Wellbeing page as well as video resources within our virtual Planet Estream platform; <https://rltv.richardlander.cornwall.sch.uk/default.aspx> for staff who wish to learn more about mental health. The MindEd learning portal; <https://www.minded.org.uk/> provides free online training suitable for staff wishing to know more about a specific mental health 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 students. 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 Kerry Towers Mental Health and Wellbeing lead and Jenny Griffiths, our Deputy Head / CPD coordinator, who can also highlight sources of relevant training and support for individuals as needed.

## Annex A student SEMH signposting:



## Annex B staff SEMH signposting:





## **Annex C SEMH provision map**

In progress as per the MHL qualification actions.