

Sibsey Free Primary School

Support for Emotional and Mental Well-being



Approved by:

Governing Body

Date:

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Next review due by:

December 2025

SIBSEY FREE PRIMARY SCHOOL

Support for Emotional and Mental Well-being

(When considering Mental Health Needs, the school will refer to the DfE publication ‘Mental health and behaviour in schools’.)

The school Designated Lead for Mental Health is Mr. Graeme Wright.

Schools have an important role to play in supporting the mental health and wellbeing of their pupils, and this includes preventing impairment of children’s health or development and taking action to enable all children to have the best outcomes.

The culture, ethos and environment of the school promotes the health and wellbeing of pupils. This includes the informal curriculum, and teaching, as well as partnerships with families and the community. Teaching can be through e.g. Relationships education, PSHE, counselling, developing social skills, and peer support.

The school has a role to play in promoting the resilience of their pupils, through providing a safe and affirming place where they can develop a sense of belonging and feel able to trust and talk openly with adults about their problems.

Our aim is to equip children to build resilience to mental health problems and to be a setting where:

- All children are valued.
- Children have a sense of belonging and feel safe.
- Children feel able to talk openly with trusted adults about any worries they may have.
- Positive mental health is promoted and valued.

The school’s role in supporting and promoting mental health and wellbeing can be summarised as:

- Prevention: Creating a safe and calm environment where mental health problems are less likely, improving the mental health and wellbeing of the whole school population, and equipping pupils to be resilient so that they can manage the normal stress of life effectively. This will include teaching pupils about mental wellbeing through the curriculum and reinforcing this teaching through school activities and ethos.
- Identification: Recognising emerging issues as early and accurately as possible.
- Early support: Helping pupils to access evidence based early support and interventions, and
- Access to specialist support: Working effectively with external agencies to provide swift access or referrals to specialist support and treatment.

Where the school has a mental health concern about a pupil that is also a safeguarding concern, immediate action will be taken following the school’s relevant policies.

Mental Health problems in children:

- Emotional disorders e.g. phobias, anxiety states, depression.
- Conduct disorders e.g. stealing, defiance, aggression, anti-social behaviour.
- Hyperkinetic disorders e.g. disturbance of activity and attention.

- Developmental disorders e.g. delay in acquiring certain skills such as speech, social ability, bladder control.
- Attachment disorder e.g. children who are markedly distressed or socially impaired as a result of an extremely abnormal pattern or attachment to parents or major care givers.
- Trauma disorders e.g. post-traumatic stress disorder, traumatic experiences or persistent periods of abuse and neglect, and
- Other mental health problems e.g. eating disorders, habit disorders, and psychotic disorders.

Key Points of school support:

- The school recognises that in order for pupils to succeed, the school needs to support them to be resilient and mentally healthy. Poor mental health undermines educational attainment.
- School operates Sibsey Scale to check on pupil wellbeing
- Where severe problems occur, a child will need support from other sources.
- The school will ensure that families and the child participate as fully as possible in decisions, and that they are provided with information and support.
- Where appropriate, the school may use the ‘Strengths and Difficulties Questionnaire’ or Boxall Profile to help judge whether a child might be suffering from a diagnosable mental health problem.

Certain individuals and groups are more at risk of developing mental problems than others. These risks can relate to the child themselves, to their family, or to their community or life events. (See Table attached as an appendix hereto.) Risk factors are cumulative and can lead to children developing behavioural problems.

Difficult events that may have an effect on a child:

- Loss or separation (resulting from e.g. death, parental separation, divorce, family conflict)
- Life changes (e.g. birth of sibling, moving house, change of schools)
- Traumatic events (e.g. abuse, domestic violence, bullying, accidents)
- Adverse Childhood Experiences – traumatic events in a child’s life.

The school may be able to support a child at such times, intervening before mental health problems develop, by identifying children with possible mental health problems, and working with parents/carers as well as the child themselves.

The school will work with others to provide a graduated approach to inform a clear cycle of support,

i.e. Assess – clear analysis of child’s needs,

Plan – set out how the child will be supported,

Do – provide that support,

Review – assess provision and make changes where needed.

Identification:

There are two key elements that schools can use to reliably identify children at risk of mental health problems:

- Effective use of data (changes in patterns of attainment, attendance), and
- Effective pastoral system (identification of unusual behaviour that needs addressing).

Children can be identified as a result of a change in their emotional state, behaviour, or interpersonal behaviours.

Strategies to promote positive mental health:

- Encouraging sense of belonging
- Celebrating all achievements – academic and non-academic
- Promoting resilience
- Through PSHE, Circle Time
- Positive classroom management and small group work
- Opportunities to develop self-esteem e.g. appointing to a school role
- Counselling
- Involvement of outside agencies (e.g. GP, Healthy Minds Service, MHST, CAMHS, voluntary organisations.)
- Developing social skills
- Support to manage emotions/feelings
- ELSA Support work
- Working with Parents
- Peer mentoring

Where a child has more complex problems, additional in-school interventions may be required, including: Support for the child's teacher, Additional educational 1:1 support, 1:1 therapeutic work, ELSA intervention, Medication, and/or Family Support/Therapy.

Staff Training:

The Designated Lead will ensure that staff members receive appropriate training to ensure that they can offer the necessary support to children with mental health needs.

Additional Sources of Support and Information:

The school will refer to Local Authority resources for additional support. Additional sources of information are included in the DfE document 'Mental health and behaviour in schools', e.g.

- NHS website
- Young Minds
- Nasen SEND Gateway
- MindEd
- Place2Be
- Young Carers
- Children's Society

(More detailed information relating to supporting children with mental health needs is available in the DfE publication, 'Mental health and behaviour in schools' – Departmental advice for school staff.)

This Policy will be reviewed biennially.

Appendix: Risk and protective factors that are believed to be associated with mental health outcomes

| | Risk factors | Protective factors |
|----------------------|--|--|
| In the child | <ul style="list-style-type: none"> • Genetic influences • Low IQ and learning disabilities • Specific development delay or neuro-diversity • Communication difficulties • Difficult temperament • Physical illness • Academic failure • Low self-esteem | <ul style="list-style-type: none"> • Secure attachment experience • Outgoing temperament as an infant • Good communication skills, sociability • Being a planner and having a belief in control • Humour • A positive attitude • Experiences of success and achievement • Faith or spirituality • Capacity to reflect |
| In the family | <ul style="list-style-type: none"> • Overt parental conflict including domestic violence • Family breakdown (including where children are taken into care or adopted) • Inconsistent or unclear discipline • Hostile and rejecting relationships • Failure to adapt to a child's changing needs • Physical, sexual, emotional abuse, or neglect • Parental psychiatric illness • Parental criminality, alcoholism or personality disorder • Death and loss – including loss of friendship | <ul style="list-style-type: none"> • At least one good parent-child relationship (or one supportive adult) • Affection • Clear, consistent discipline • Support for education • Supportive long term relationship or the absence of severe discord |

| | Risk factors | Protective factors |
|-------------------------|---|---|
| In the school | <ul style="list-style-type: none"> • Bullying including online (cyber) • Discrimination • Breakdown in or lack of positive friendships • Deviant peer influences • Peer pressure • Peer on peer abuse • Poor pupil to teacher/school staff relationships | <ul style="list-style-type: none"> • Clear policies on behaviour and bullying • Staff behaviour policy (also known as code of conduct) • 'Open door' policy for children to raise problems • A whole-school approach to promoting good mental health • Good pupil to teacher/school staff relationships • Positive classroom management • A sense of belonging • Positive peer influences • Positive friendships • Effective safeguarding and Child Protection policies. • An effective early help process • Understand their role in and be part of effective multi-agency working • Appropriate procedures to ensure staff are confident to can raise concerns about policies and processes, and know they will be dealt with fairly and effectively |
| In the community | <ul style="list-style-type: none"> • Socio-economic disadvantage • Homelessness • Disaster, accidents, war or other overwhelming events • Discrimination • Exploitation, including by criminal gangs and organised crime groups, trafficking, online abuse, sexual exploitation and the influences of extremism leading to radicalisation • Other significant life events | <ul style="list-style-type: none"> • Wider supportive network • Good housing • High standard of living • High morale school with positive policies for behaviour, attitudes and anti-bullying • Opportunities for valued social roles • Range of sport/leisure activities |