Mental health policy.

**Trewirgie Infants’ & Nursery School**

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| **Approved by:** | C Callow | **Date:** 17.03.2023 |
| **Last reviewed on:** | September 2023 |
| **Next review due by:** | September 2024 |

Trewirgie Infants’ School Mental Health Policy

**Safeguarding Statement**

At Trewirgie Infants School we respect and value all children and are committed to providing a

caring, friendly and safe environment for all our pupils so they can learn, in a relaxed and secure atmosphere. We believe every pupil should be able to participate in all school activities in an enjoyable and safe environment and be protected from harm. This is the responsibility of every adult employed by, or invited to deliver services at Trewirgie Infants’ School. We recognise our responsibility to safeguard all who access academy and promote the welfare of all our pupils by protecting them from physical, sexual or emotional abuse, neglect and bullying.

**Policy Intent Statement**

At Trewirgie Infants’ 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 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.

**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.

• 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.

**Key Staff Members**

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

Designated Safeguarding Lead Mrs Bateman

Deputy Designated Safeguarding lead Mrs Callow and Miss Mckerron

Named Person (Child Protection Lead) Mrs Bateman

Pastoral Lead- Miss Mckerron

SENCO- Mrs Bateman

PSHE lead – Mrs Bateman

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 Safeguarding 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.

**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 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.

**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 and through our newsletters and website

**Support at School**

Nurture support is available for children identified as being vulnerable to mental health issues. Children who are going through difficulties such as family illness, separation, bereavement, or other stressful situations are supported with small group TiS or pastoral intervention.

Others who are suffering from low mood or anxiety will be referred to our MHST for support.

**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 designated child protection lead/ named persons.

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

**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:

• Identifying children who are showing early signs of anxiety, emotional distress, or behavioural problems;

• Providing specific help 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.

• Providing interventions.

• 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;

• Any support offered will take account of school policies regarding confidentiality;

**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 CPOMs

**Confidentiality**

If a member of staff feels it is necessary to pass on concerns about a child to either someone within or outside of the school, then this will be first discussed with the child. 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.

**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 to enable them to keep pupils safe. A member of staff (SENCo) is also a nominated mental Health Lead Mrs Bateman.

**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, work load pressure, poor working conditions. To every extent possible, we aim to recognize 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

**Policy Review**

This policy will be reviewed every two years as a minimum.