

# MENTAL HEALTH POLICY

HORIZONS EDUCATION TRUST, AMERICAN LANE, HUNTINGDON, CAMBRIDGESHIRE PE29 1TQ

DOCUMENT CONTROL			
ISSUED	CHANGES FROM PREVIOUS VERSION		
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#### 1.Policy Statement

We are committed to promoting a positive mental health for every member of our staff and student body, their families, and trustees. We pursue this aim using universal, whole Academy approaches and specialised targeted approaches aimed at vulnerable students and, using effective policies and procedures, we ensure a safe and supportive environment for all affected - both directly and indirectly - by mental health issues. We know that everyone experiences life challenges that make us vulnerable, and at times anyone may need additional emotional support. We take the view that positive mental health is everybody's business and that we all have a role to play.

#### 2. Scope

This policy describes the Academy approach to promoting positive mental health and wellbeing. This policy is intended as guidance for all staff including non- teaching staff and trustees. It should be read in conjunction with other relevant Academy policies.

#### 3. Policy aims

- Promote positive mental health and well-being in our Academy community, including pupils, parents, staff, and trustees.
- Increase understanding and awareness of common mental health and wellbeing issues.
- Alert staff to early warning signs of mental ill health.
- Provide the right support to students with mental health issues and know where to signpost them and their parents/carers for specific support.
- Develop resilience amongst students and raise awareness of resilience building techniques.
- Raise awareness amongst staff so that they are supported in relation to looking after their wellbeing; instilling a culture of staff and student welfare where everyone is aware of signs and symptoms with effective signposting underpinned by behaviour and welfare around our Academies.

#### 4. Concerns about Positive Mental health and Wellbeing

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

- Senior Mental Health Lead
- Intervention Staff
- Mental Health Council

Academy staff could become aware of changes in behaviour which may indicate a student is experiencing mental health or emotional wellbeing issues. These changes may include:

- 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.
- Lowering of academic achievement.
- Talking or joking about self-harm or suicide.

- 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 secretively.
- Lateness to or absence from Academy
- Repeated physical pain or nausea with no evident cause.
- An increase in lateness or absenteeism.

Any member of staff who is concerned about the mental health or wellbeing of a student should speak to the Senior Mental Health Lead or a member of SLT in the first instance. Then an individual programme can be created or a referral to mental health professionals can be made. If there is a concern that the student is in danger of immediate harm, then the Academy Safeguarding and child protection procedures should be followed.

If the student presents with a medical emergency, then the normal procedures for medical emergencies should be followed, including alerting the first aid staff and contacting emergency services if necessary.

If the student is in mental health crisis, consider calling 111 option 2. On occasion, a referral to Younited, Mental Health Support Team (MHST), or other specialist service may be appropriate. Guidance about referring to Younited is provided in Appendix A and all referrals to MHST will be managed by the Senior Mental Health Lead.

#### 5. Teaching about Mental Health

The skills, knowledge and understanding needed by our children to keep themselves and others physically and mentally healthy safe are included as part of our PSHCE curriculum and embedded throughout our Academy learning community in line with the <a href="https://doi.org/10.25/10.25/20.2

- Mental wellbeing is a normal part of daily life, in the same way as physical health.
- Experiencing a range of emotions (e.g., happiness, sadness, anger, fear, surprise, nervousness) in relation to different experiences and situations is a normal part of life. This only becomes a concern when impacting daily functioning and learning to recognise what is appropriate and proportionate is a skill to be developed.
- Recognising and talking about your own feelings and the feelings of others is important. There are also many words that can be used to express emotions.

- Self-care techniques, including the importance of rest, time spent with friends and family, time spent doing hobbies or other activities have a positive impact on mental wellbeing.
- Isolation and loneliness can affect children and that it is very important for children to discuss their feelings with a trusted adult and seek support when needed.
- Bullying (including cyberbullying) has a negative and often lasting impact on mental wellbeing.
- There are many ways to seek support (including reaching out to staff in Academies) and many services that can help if they are worried about themselves or someone else.
- It is common for people to experience mental ill health. For many people who do, the problems can be resolved if the right support is made available, especially if accessed early enough.

#### 6. Supporting our students with their additional needs

Although having an additional need (e.g., ASC) does not necessarily mean a learner will also have a mental health concern, research does suggest that there is a high chance of a concurrent mental health diagnosis. Therefore, staff should always consider the following when discussing mental health with learners:

- Communicate clearly and always allow the student time to process information.
- Use visual supports when needed (e.g., emotion cards)
- Assist in planning any necessary next steps and break this down as much as possible.
- Provide a quiet area where a student can go if they are particularly anxious
  or stressed and encourage the use of this area. Known safe spaces and safe
  people should be reviewed with each learner regularly.
- Students may experience higher anxiety at break times, transition times, or unstructured. It may help to monitor these patterns and create an individual plan where necessary (e.g., access to safe people and places).
- If a student is behaving in a challenging way, try to identify the reason for the behaviour. What triggers it? Can anything be put in place to support? All behaviour is communication.
- Be aware that some learners will struggle with social interactions, and this may cause conflict with peers, leading to heightened emotions. However, social support from peers can have a positive impact on mental health.

#### 7. Preparing for Adulthood

Our curriculum allows for personalised pupil outcomes which are focused on the young person's aspirations and leading to them having as independent a life as possible. This can have a positive impact on mental health by building a clearer, more optimistic view of the future and increasing self-esteem by showing learners that they can achieve.

All learning is intended to ensure that students are preparing for adulthood by developing and building skills regarding:

- **Higher education and/or employment** this includes exploring different employment options, such as support for becoming self-employed, help from supported employment agencies, and sourcing work experience.
- **Independent living** this is integrated across the curriculum, encouraging learners to gain skills in areas such as cooking, self-care, or laundry and being able to articulate their own views on how they would like to live in the future.
- **Participating in society** learning the necessary skills to maintain friendships and other supportive relationships. Knowing the value of participating in, and contributing to, the local community and how to get involved with this.
- Being as healthy as possible in adult life- knowing when and how to access physical or mental health support and understand some ways to maintain health before it becomes a concern (e.g., coping skills to maintain mental health).

The content of lessons will be determined by the specific needs of each cohort 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.

#### 8. Managing Disclosures

At times, a pupil may choose to tell a staff member concerns that they have about their own emotions or well-being. All staff need to know how to respond appropriately to a disclosure, following the Academy Safeguarding Policy. All staff should respond in a calm, supportive and non-judgemental way. Staff should actively listen rather than advise and their first thoughts should be of the student's emotional and physical safety.

All disclosures should be recorded on My Concern where information can then be shared with appropriate staff members and plans implemented regarding next steps.

#### 8.1 Confidentiality

Staff must be honest with regards to the issue of confidentiality and needing to share information. They should never promise the child that they will keep any disclosure to themselves and should inform the pupil who they are going to talk to, what they are going to tell them and why it is important that they pass these concerns on. It may also be useful to offer reassurance that the learner will not be in trouble for making the disclosure and that all the next steps are to support them rather than punish them.

#### 8.2 Informing Parents/Carers

Parents will usually be informed if a child makes a disclosure and staff need to be sensitive when sharing this information with parents/carers. It can be upsetting for parents to learn of their child's difficulties and staff should give the parent/ carer time to reflect. A brief record of the meeting should be kept in line with Trust policy.

Staff should always signpost to further sources of information or support where possible. However, if a child gives reason to believe that there may be underlying child protection issues, a Designated Safeguarding Lead should be informed

immediately to assess the next steps regarding if a parent should be informed or a referral should be made.

#### 9. Working with parents/carers and the Trust community

We recognise that family plays an important role in influencing young people's emotional health and wellbeing; we will work in partnership with parents and carers to promote emotional health and wellbeing by:

- Ensuring that all parents are aware of who to talk to if they have any concerns about their child's mental health and wellbeing.
- Highlighting sources of information and support about common mental health issues through our communication channels (website, newsletters, coffee evenings etc.)
- Make the Academy policy easily accessible to parents and carers.
- Keep parents informed about the topics that children are learning about in their Academy/the Trust.
- Allocating a Family and Inclusion Worker if appropriate (see Appendix C for criteria)
- Offering a referral for a joint Academy and parent consultation with MHST who can offer advise on how best to support a child experiencing mental health difficulties moving forwards.

#### 10. Training

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

The Senior Mental Health Lead will receive professional training in the SMHL role and in Youth Mental Health First Aid (See Appendix B for mental health first aid outline). We will publish relevant information to staff who wish to learn more about mental health and this policy will be provided to all staff as part of their induction. 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.

#### 11.Policy Review

This policy will be reviewed every two years as a minimum. The next review date is October 2025.

In between updates, the policy will be updated when necessary to reflect local and national changes. This is the responsibility of Senior Mental Health Lead.

#### **Appendix A: Younited Referral Guidance**

The online referral form for Younited can be found using the link below: YOUnited Referral Form (office.com)

This form requires prior consent from the young person and their parent/guardian. The form needs to be completed in one sitting and cannot be saved to return to later. Therefore, answers to the following questions should be known prior to starting a referral. The form will also provide an email address to send additional information to. This will include the EHCP.

Child/Young Persons Contact Details	NHS Number
First Name	Last Name
Prefered Name	Family Name
Date of Birth	Gender
Age	Ethnicity
Preferred Language	Is an Interpreter needed for this language?
Are there any additional communication needs?	
Please expand on required communication needs	
Preferred Contact Number	Alternative Contact Number and Relationship
Email Address	Agreed method of Contact
Postal Address	
Is there any known Social Care involvement and/or open early help episode?	
Please provide more details here if you would like to add more information about the young person's Social Care / Early Help status. Provide the Liquid Logic number.	
Does the young person have either of the following:	EHCP (Education and Health Care Plan)
Is the young person a carer for a family member?	Is the young person a Child in Care (CIC)?
Please add additional information here if needed	

Details of parent(s)/main carers/siblings

Is there a main carer?			
First Name		Last Name	
Provide address of main carer if different to young person's address			
Relationship to the young person			
Phone Number		Email	
Does this person have parental responsibility?			
Please provide the name and contact details for the person who does have parental responsibility?			
Please add any other information you think is relevant here			
GP and Academy D	Details		
GP practice contact details			
Health Visitor/Academy Nurse			
Is the young person in education or training?			
Name of Academy			
Contact person at Academy and contact details (if known)			
<b>Referrers Details</b>			
First Name		Last Name	
Job Title		Contact Number	
Email Address		Referral Date	
Address			
Consent Details			
Young person's consent			
Parent/Guardian consent (if under 16)			
Is the young person happy for us to speak to their Parent/Guardian?			

Please expand why they do not give this consent	
Preferred adult contact (name, phone number and email address)	
Do you know if the young person is currently accessing support or on a waiting list to receive emotional wellbeing and mental health support?	
Is the young person currently working with, or have they worked with any other agencies, people or organisations including their Academy?	
Agency 1 Details	
Is the young person happy for us to get in contact with this agency?	
Is there another agency?	
Agency 2 Details	
Is the young person happy for us to get in contact with agency 2?	
Is there another agency?	
Agency 3 Details	
Is the young person happy for us to get in contact with agency 3?	
Reason for Referral	
Description of current mental health need and when this first became problematic	
Description of impact of this on keys areas of their life (Academy/work life; family life and relationships; social life)	
What they have tried so far (previous mental health interventions)	
What the young person hopes/wants from seeking help from us now	
Any identified risks	
Anything else that the young person thinks we should understand about them	

Information Governance	
I agree to information being shared between agencies	

A copy of the form will be emailed to the referrer and should be saved in the learner's purple folder under referrals. Younited may also send a referral back to the MHST if it does not meet their threshold. MHST will contact the Senior Mental Health Lead if this is the case.

### **Appendix B: Mental Health First Aid Guidance**

## MENTAL HEALTH FIRST AID **ACTION PLAN**

- A pproach the person, assess and assist with any crisis
- Listen and communicate non-judgementally
- **G** ive support and information
- Encourage the person to get appropriate professional help
- Encourage other supports



#### **Appendix C: Family and Inclusion Worker Allocation Criteria**

Red- Learner will be immediately added to the caseload if all below criteria are met:

- Non-engagement for 10 consecutive working days
- Requires alternative education organising that they would engage with OR shows Academy phobia
- Welfare checks are needed as no other professionals are involved OR there are major safeguarding concerns

Amber- Learner will be added to the case load when capacity is available and triaged on a point system with one point per criteria met:

- A reduced timetable has been put in place by Academy
- A parent is persistently contacting Academy voicing a need for support
- Sporadic Academy refusal
- Academy/Trust staff have raised concerns
- Child is in Y10 or Y11 and meets other criteria listed

Green- Family and Inclusion workers are happy to consult and advise on how best to proceed with:

- Work experience
- Referrals
- Attendance monitoring on LA organised reduced timetables
- Any other initial concerns or queries

Policy agreed on:
Signed on behalf of the Trustees
Committee:
Author:
Review date (optional):
Website Y/N