



THE ACADEMY OF
ST FRANCIS
OF ASSISI

Mental Health and Emotional Wellbeing Policy

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Governing Committee:	Full Governing Body
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THE ACADEMY OF ST FRANCIS OF ASSISI

Whole School Approach



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1.0 Policy statement

At The Academy of St Francis of Assisi Academy, we are committed to promoting a whole school approach to positive mental health and emotional wellbeing for all students, their families and members of staff and governors. Our open culture allows students' voices to be heard, and through the use of effective policies and procedures we ensure a safe and supportive environment for all, recognising that mental health is a continuum. We seek to actively learn ways to manage our own mental health and that of the students in order to improve emotional literacy and build a community of positive thinkers where wellbeing and mental health are explored and discussed without shame. This year we are launching a strategic approach to mental health by linking the expertise across the Academy and the many systems already in place with our whole school approach. Alongside safeguarding; mental health is everyone's responsibility, and we are working to promote an environment that fosters positive mental health to improve both attainment and attendance. Regular meetings are held with the Mental Health Impact Team, to ensure all pupils are given access to the right care.

Mental Health Services in action at ASFA:

YPAS: Molly Jo Sheridan

CAMHS – Alex Hartley link worker

ELSA: Dawn Defferd

Emotion Coach: Sarah Brooks

School Counsellor: Ray Loftus

EAL Intervention: Mandy Gamble

Oakleaf

Priceless: Chaplain

Sensory Suite

As well as wellbeing and mental health content delivered through Curriculum for Life and the PSHE curriculum, we are launching Mental Health Ambassadors and Mental Health Mentors. Both groups are made up of pupils who have applied to the roles and are in the

process of being trained to deliver assemblies, create podcasts, social media content and mentor younger pupils. These pupils will be crucial in shaping the culture of inclusivity, diversity and respect for all, enabling and initiating conversations around positive mental health that remove shame and stigma. Form times are also key in delivering tools to enhance wellbeing and gain emotional literacy, using tools such as the emotional barometer.

Staff wellbeing is a priority if we are to retain both teaching and support staff. A staff wellbeing committee has been set up in order to promote socials and weekly activities, dog walks, staff choir, hero of the week etc. Teacher morale directly correlates with pupil attainment – higher morale, better pupil's sense of belonging and academic results (Raines 2011). Multiple studies have found that better workplace connection improves psychological health, and physiological health leading to less staff absence. Training will be delivered for staff on their own emotional wellbeing (Inset Jan 2023) with the launch of HUB groups to embed connection and emotional literacy into the staff vocabulary, establishing a positive culture and atmosphere in the Academy. CPD on sleep training for staff is also scheduled.

2.0 Scope

This policy is a guide to all staff – including non-teaching and governors – outlining The Academy of St Francis of Assisi's whole school approach to promoting mental health and emotional wellbeing. It should be read in conjunction with other relevant school policies.

3.0 Policy Aims

- Promote positive mental health and emotional wellbeing in all staff and students.
- Increase understanding and awareness of common mental health issues.
- Enable staff to identify and respond to early warning signs of mental ill health in students.
- Enable staff to understand how and when to access support when working with young people with mental health issues.
- 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 and gain recognition from SLT that staff may have mental health issues, and 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 school.

4.0 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:

- Senior Leadership Team
 - SENCO - Laura Riley
- Whole School Approach Senior Mental Health Lead - Abigail Huthwaite
 - ROAR/MHFA trained staff
 - PSHE/RSE Coordinator – Martin Maguire and Dan Fox
- School Commissioned Mental Health Staff (School counsellors) Mental Health Impact Team – RL, LR, SW, SB, DD, AH
 - Heads of Year
 - Heads of Subject
 - External Education Mental Health Team (MHST, Seedlings, Wellbeing Clinic, YPAS Senior Practitioner)
- Designated Safeguarding Leads

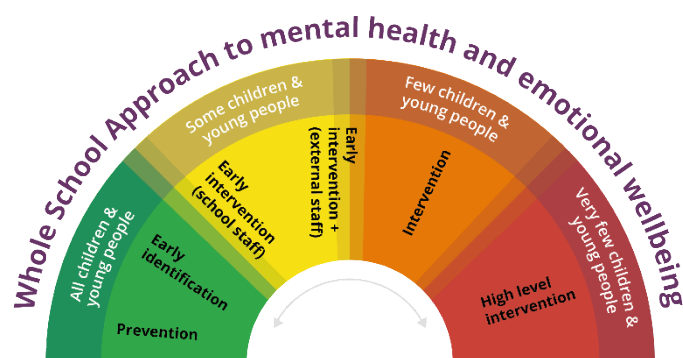
If a member of staff is concerned about the mental health or wellbeing of student, in the first instance they should report it on CPOMS & speak to the DSLs, Jo Leech, Chris Williams, Operational Safeguarding Lead, Jo Thompson, Sue Warrior or Louise Mitchell. Pupils have a clear route to follow if they also want to seek help for themselves, see Mental Health Continuum.

If there is a concern that the student is high risk or in danger of immediate harm, the school's safeguarding and child protection procedures should be followed without delay.

If the child presents a high-risk medical emergency, relevant procedures should be followed, including involving the emergency services if necessary.

5.0 Levels of Need

Levels of need are used to help education providers and services to determine the type of support that might be needed for children/young people. There are 4 levels:



Green = Prevention and early

identification. This level is for all children and young people and represents the basic level of mental health awareness and support strategies that all children and young people need for positive emotional wellbeing.

Yellow = Early Intervention. At this level of need children/young people will be showing early signs of distress that may be the start of an emerging mental health issue. Short-term interventions that build coping strategies are given to prevent these issues from developing – small changes to prevent bigger challenges.

Orange = Intervention. At this level children and young people will need more specific support as their mental health problem will be more developed and significantly impacting their day-to-day life. There may also be other complexities such as trauma or neurodevelopmental conditions. Interventions are chosen to suit the needs of each child/young person and will vary in modality, and intensity.

Red = High Level Intervention. At this level children and young people will need high-level support for mental health conditions that require support from Alder Hey Fresh CAMHS. Children may be at crisis point, require medication, or several different types of specialist support.

5.1 Individual Care Plans

When a pupil has received a diagnosis of a mental health issue, or is receiving support either through CAMHS or another organisation (orange/red level), they will be on the SEND register.

An Individual Care Plan will be drawn up and involves the pupil, parents, and relevant professionals. Speak to DSLs, their key worker if they have one or our SENCO for more information on how to keep them safe, including

- Details of the pupil's situation/condition/diagnosis
- Special requirements or strategies, and necessary precautions
- Medication and any side effects

6.0 Mental Health Promotion

Mental Health is everyone's business in our school, and we promote an environment that fosters inclusion, diversity and respect.

The skills, knowledge and understanding our students need to keep themselves - and others - physically and mentally healthy and safe are included as part of our whole school approach to positive mental health. As well as the PSHE curriculum, our pupil led Mental Health Ambassadors and Mental Health Mentors run the positive programme which allows pupils to become leaders in shaping the culture of inclusivity. We have trained them to lead assemblies, run social media campaigns and a podcast, all to initiate conversations around positive mental health and remove any stigmas. Form times are given to learning tools to enhance wellbeing and gain emotional literacy, including the emotional barometer and the worry filter. We believe it is everyone's responsibility to enable conversations around how to navigate big emotions and react positively to challenges.

We will follow the guidance issued by the PSHE Association to prepare us to teach about mental health and emotional health safely and sensitively.

<https://www.pshe-association.org.uk/curriculum-and-resources/resources/guidance-preparing-teach-about-mental-health-and-emotional-wellbeing> Incorporating this into our curriculum at all stages is a good opportunity to promote students' wellbeing through the development of healthy coping strategies and an understanding of students' own emotions as well as those of other people. We are building curriculum maps across the Academy that are rich in opportunities to develop resilience and positive mental health in all lessons, from science experiments to speaking and listening assessments, weekly performance opportunities in Drama lessons to exploring success and failure in sporting activities.

Additionally, we provide students who do develop difficulties with strategies to keep themselves healthy and safe, as well as guiding students to support any of their friends who are facing challenges. **See Section 14 for Supporting Peers**

7.0 Signposting

We will ensure that staff, pupils and parents/carers are aware of the support and services available to them, and how they can access these services.

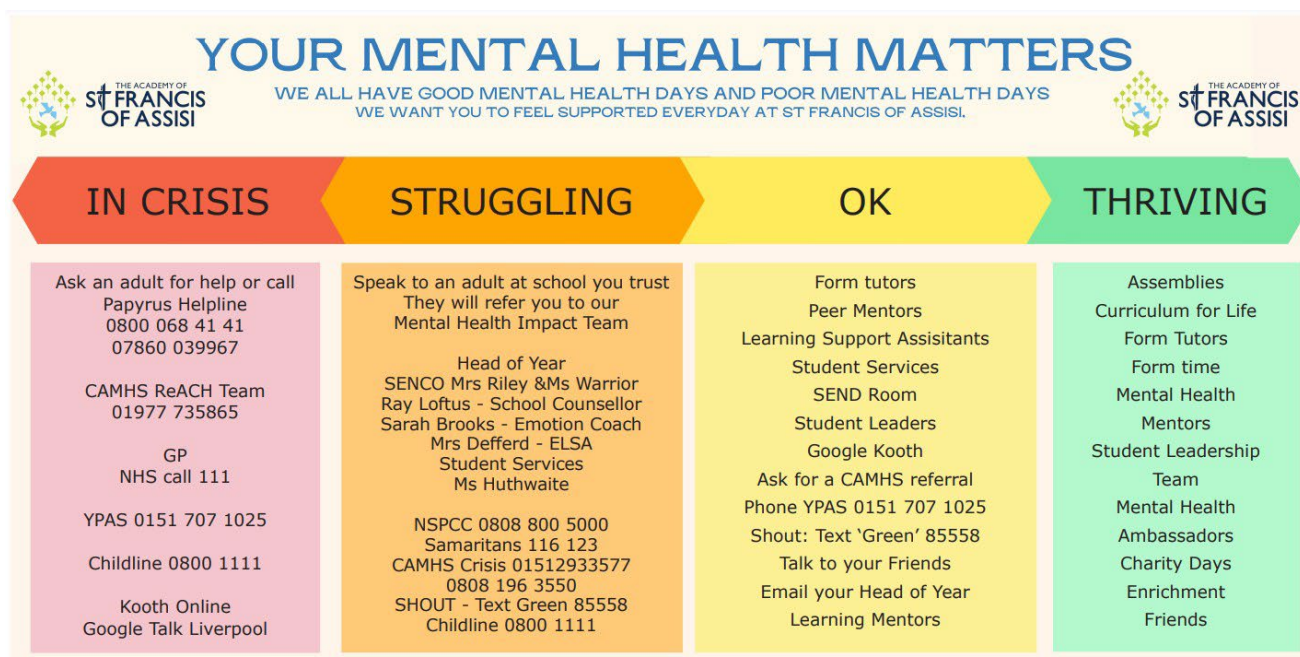
Within the school (noticeboards, toilets etc.) and through our communication channels (newsletters, website), we will share and display relevant information about local and national support services and events.

The aim of this is to ensure students understand:

- What help is available
- Who it is aimed at
- How to access it
- Why should they access it
- What is likely to happen

8.0 Our School Mental Health Pathway

The school's mental health pathway maps the support available to children across all levels of need.



Pupil led groups are also widely encouraged and recognised as spaces where pupils will thrive knowing they are not alone. These include: Student leaders, Mental Health Ambassadors, Mental Health Mentors. We welcome all involvement from teachers and pupils with new ideas.

Local Support

In Liverpool, there are a range of organisations and groups offering support, including the **CAMHS partnership Education Mental Health Teams**.

These teams deliver accessible support to children, young people and their families, whilst working with professionals to reduce the range of mental health issues through prevention, intervention, training and participation.

Details of our Mental Health Impact Team are as follows:

Abi Huthwaite

Laura Riley

Ray Loftus

Sarah Brooks

Dawn Defford

This team meets fortnightly to host a panel discussing pupil referrals and appropriate pathways for everyone, in a triage system, referring to ELSA, Emotion Coach, School Counsellor, YPAS and CAMHS where appropriate. SLT, HOY or any staff member can refer a pupil, using the [Puil Mental Health Referral Form](#) linked here. We track all pupils who are referred and record details of their support on Arbor.

9.0 Recognising signs and symptoms of mental distress

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 write it on CPOMS to alert DSLs and relevant teachers. Staff can also complete the pupil mental health referral form which will inform the MHIT Panel meeting of the pupil need, and the triage pathway system initiated.

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
- 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

10.0 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 work closely with school nurse, CAMHS, KOOTH and YPAS and their teams in supporting the emotional and mental health needs of school-aged children and are equipped to work at community, family and individual levels. Their skills cover identifying issues early, determining potential risks and providing early intervention to prevent issues escalating.

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

- Providing specific help for those children most at risk (or already showing signs) of social, emotional, and behavioural problems;
- Working closely with Liverpool City Council Children's Services, Liverpool CAMHS and other agencies services to follow various protocols including assessment and referral;
- Identifying and assessing in line with the Early Help Assessment Tool (EHAT), children who are showing early signs of anxiety, emotional distress, or behavioural problems;
- Discussing options for tackling these problems with the child and their parents/carers. Agree an Individual Care Plan as the first stage of a 'stepped care' approach;
- Providing a range of interventions that have been proven to be effective, According to the child's needs;

- Ensure young people have access to pastoral care and support, as well as specialist services, including Liverpool CAMHS, so that emotional, social and behavioural problems can be dealt with as soon as they occur;
- Provide young people with clear and consistent information about the opportunities available for them to discuss personal issues and emotional concerns. Any support offered should take account of local community and education policies and protocols regarding confidentiality;
- Provide young people with opportunities to build relationships, particularly those who may find it difficult to seek support when they need it; and
- The identification, assessment, and support of young carers under the statutory duties outlined in the Children & Families Act 2014.

Our school is ACE aware and currently taking part in attachment and trauma responsive schools project. All staff will receive training, resources and the academy is currently reviewing its policies, procedures and practices.

11.0 Managing disclosures

If a student 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 should be recorded confidentially on CPOMS, including:

- | | |
|---|--|
| ▪ Date | ▪ Nature of the disclosure & main points from the conversation |
| ▪ Name of member of staff to whom the disclosure was made | ▪ Agreed next steps |

This information will be shared with DSLs, without delay, and may also be shared with Heads of Year and SLT depending on the nature of disclosure.

12.0 Confidentiality

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

- | | |
|----------------------------------|---------------------------------|
| ▪ Who we are going to tell | ▪ Why we need to tell them |
| ▪ What we are going to tell them | ▪ When we're going to tell them |

Ideally, consent should be gained from the student first, however, there may be instances when information must be shared, such as students up to the age of 16 who are in danger of harm.

It is important to also safeguard staff emotional wellbeing. By sharing disclosures with a colleague this ensures one single member of staff isn't solely responsible for the student. This also ensures continuity of care should staff absence occur and provides opportunities for ideas and support.

Parents must always be informed, but students may choose to tell their parents themselves. If this is the case, a timescale of 24 hours is recommended to share this information before the school makes contact with the parents/carers.

If a pupil 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.

13.0 Parents/carers

13.1 Working with parents/carers

If it is deemed appropriate to inform parents there are questions to consider first:

- Can we meet with the parents/carers face-to-face?
- Where should the meeting take place – some parents are uncomfortable in school premises so consider a neutral venue if appropriate.
- Who should be present – students, staff, parents etc.?
- What are the aims of the meeting and expected outcomes?

We are mindful that for a parent, hearing about their child's issues can be upsetting and distressing. They may therefore respond in various ways which we should be prepared for and allow time for the parent to reflect and come to terms with the situation.

Signposting parents to other sources of information and support can be helpful in these instances. At the end of the meeting, lines of communication should be kept open

should the parents have further questions or concerns. Booking a follow-up meeting or phone call might be beneficial at this stage.

Ensure a record of the meeting and points discussed/agree are added to the pupil's record and an Individual Care Plan created if appropriate.

13.2 Supporting parents

We recognise the family plays a key role in influencing children and young people's emotional health and wellbeing; we will work in partnership with parents and 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, instagram, newsletters etc.);
- Offering support to help parents or carers develop their parenting skills. This may involve providing information or offering small, group-based programmes run by community nurses (such as school nurses and health visitors) or other appropriately trained health or education practitioners; and
- 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. This will include support to participate in any parenting sessions, by offering a range of times for the sessions or providing help with transport and childcare. We recognise this might involve liaison with family support agencies.

14.0 Supporting Peers

When a student 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 friends may need additional support. Support will be provided 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 needs 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

15.0 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 students safe. Many staff members have received ROAR training and Mental Health First Aid training.

Our designated WSA Senior lead and MHIT team will attend the WSA termly network meetings.

We will host relevant information on our website for staff who wish to learn more about mental health. Regular training can be accessed through <https://www.liverpoolcamhs.com/training/>. The MindEd learning portal also provides free online training suitable for staff wishing to know more about a specific 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 Julie Marshall, Mental Health Lead, who can also highlight sources of relevant training and support for individuals as needed.

16.0 Policy Review

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

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

Any personnel changes will be implemented immediately.