



Barnhill

COMMUNITY HIGH SCHOOL

Mental Health and Wellbeing Policy



MIDDLESEX
LEARNING
PARTNERSHIP

Approved by: LGB Board

Date: March 2025

Next review due by: March 2028

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 Organisation).

At Barnhill School, we aim to promote positive mental health and wellbeing for every member of our school community. Wellbeing is valued and we actively promote it. We pursue this aim using universal, targeted and specialist approaches aimed at vulnerable students. In addition to promoting positive mental health and wellbeing, we aim to recognise and respond to mental ill health. According to MHFA England and MIND, in an average classroom, three students will be suffering from a diagnosable mental health difficulty. One in ten young people between the ages of 5 and 16 will have an identifiable mental health difficulty at any one time. By the time they reach university this figure is as high as 1 in 6. Around 75% of mental health disorders are diagnosed in adolescence. By developing and implementing practical, relevant and effective mental health and wellbeing policies and procedures, we can promote a safe and stable environment for students affected both directly, and indirectly, by mental ill health. We also recognise the link between physical activity and positive mental health and wellbeing, and we encourage our school to be an 'active school'.

What is this Policy for?

This document describes the school's approach to promoting positive mental health and wellbeing. The policy is about student mental health but of course staff mental health and wellbeing is interrelated and the two go hand in hand. Positive wellbeing affects schools culture. This policy is intended as guidance for all staff including support staff and governors. This policy should be read in conjunction with the Trust's: E-Safety policy; Supporting students with Medical Conditions policy, in cases where students' mental health difficulties overlap with or are linked to a medical condition; the SEND policy, in cases where a student has an identified special educational need; and, Safeguarding Policy, in cases where there is a specific requirement for this. This policy should also be read in conjunction with the anti-bullying, PHSE, self-injury and eating disorders policies. Barnhill school is committed to ensuring the wellbeing of staff and students. It is expected that all staff and students are able to contribute to own their own wellbeing as well as contribute to the wellbeing of others.

This policy sets out the framework for a clear and consistent mental health and wellbeing provision by:

- Promoting positive mental health and wellbeing in all staff and students
- Increasing understanding and awareness of common mental health difficulties
- Alerting staff to early warning signs of mental ill health
- Providing support to staff working with young people with mental health difficulties
- Providing support to students suffering mental ill health and their peers and parents/carers
- Promoting physical activity and resilience

Policy aims

At our school, we will always:

- Help children to understand their emotions and experiences better.
- Ensure our students feel comfortable sharing any concerns and worries.
- Help children to form and maintain relationships.
- Encourage children to be confident and help to promote their self-esteem.
- Help children to develop resilience and ways of coping with setbacks.

We will always promote a healthy environment by:

- Promoting positive mental health and emotional wellbeing in all students and staff.
- Celebrating both academic and non-academic achievements.
- Promoting our school values and encouraging a sense of belonging and community.
- Providing opportunities to develop a sense of worth and to reflect.
- Promoting our students' voices and giving them the opportunity to participate in decision making.
- Celebrating each student for who they are and making every student feel valued and respected. • Adopting a whole school approach to mental health and providing support to any student that needs it.
- Raising awareness amongst staff and students about mental health issues and their signs and symptoms.
- Enabling staff to respond to early warning signs of mental-ill health in students. • Supporting staff who are struggling with their mental health

Who is this policy for?

All staff and Governors.

1. Policy Standards

1. Lead Members of Staff

1.1 Designated and Deputy Safeguarding Lead (DSL/DDSL)

1.2 SENDCo

1.2 Mental Health Lead/Wellbeing Lead

1.4 PSHCE Lead

Any member of staff who is concerned about the mental health and/ or wellbeing of a student should speak to the student in the same way they would support students with any kind of concern. If they are willing to share information: it is important to notify the student that this information may need to be passed on to their tutor/ the safeguarding team/ a mental health first aider. If there is a fear that the student is in danger of immediate harm then the normal safeguarding procedures should be followed. If the student presents a medical emergency then the normal procedures for medical emergencies should be followed, including alerting the first aid staff and contacting the emergency services if necessary.

2. Supportive documentation

It is helpful to document the support given to students with mental health difficulties. There are a number of documents that could be used depending on the nature of students' mental health difficulties, including:

- Risk Assessments – Used to manage any risks associated with students' mental health difficulties, including risks to themselves and others;
- Individual Education Plans – Used to support students with more complex mental health difficulties that overlap with, or are linked to, a diagnosable medical condition that may

require medication. This could also include a safety plan for the student both within and out of school.

Any supportive documentation should be drawn up involving the student, parents/ carers and relevant health professionals, and should centre on the role that the school can play in supporting students' mental health difficulties.

All concerns should be logged onto 'MyConcern'

3. Teaching about Mental Health and Wellbeing

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 PSHCE curriculum. The specific content of lessons will be determined by the age and specific needs of the cohort being taught 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.

We teach the students about mental health and wellbeing, and how it can fluctuate between both positive and negative. Where possible we try to embed mindfulness into curriculum or enrichment time. We also ensure staff understand how important resilience is and provide opportunities to develop this.

Barnhill School will ensure that staff, students and parents/carers 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.

We will display relevant sources of support in communal areas such as corridors, dining room, assembly hall, Library and toilets, and will regularly highlight sources of support to students within relevant parts of the curriculum. Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring students understand:

- What help is available
- Who the help is aimed at
- How to access help
- Why it is helpful to access help
- What is likely to happen next

4. Warning Signs

School staff may become aware of warning signs which indicate a student is experiencing mental health or wellbeing difficulties. These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with the relevant safeguarding/pastoral staff, mental health and wellbeing lead, and/or SENDCo.

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

5. Support available

Barnhill School have developed a mentoring scheme so that students can access support at a range of levels. This can be at a lower level with their tutor, with a particular member of staff supporting at a higher level or with the Mental Health Lead and other directed support staff.

Mentoring can be one to one, or in a group providing direct support for bereavement (Seasons For Growth), students witnessing domestic violence (Healing Together) or mental health issues (emotions).

Barnhill School will also signpost students to external agencies that can support them. This could be to advise contacting their GP or providing help sheets to online support; NSPCC, ChildLine and Kooth.

Barnhill School will also provide opportunities through assemblies, PSHCE and talks delivered by professionals to experience and gain insight into support and understand and be empathetic for students who suffer from mental ill health.



6. Working with Parents/Carers

Where it is deemed appropriate to inform parents / carers, we need to be sensitive in our approach. Before disclosing to parents / carers 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/carers, the student, other members of staff.
- What are the aims of the meeting?
- We also need to consider staff safety concerns

It can be shocking and upsetting for parents/carers to learn of their child's difficulties and many may respond with anger or fear, or become upset during the first conversation. We should be accepting of this (within reason) and give the parent/carer time to reflect. We will always highlight further sources of information and give them leaflets to take away where possible. Sharing sources of further support aimed specifically at parents/carers can also be helpful too.

We will 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/carers often have many questions as they process the information. Each meeting will be finished with agreed next steps and a brief record of the meeting on the student's record will always be kept.

7. Working with All Parents / Carers

Parents/Carers are often very welcoming of support and information from the school about supporting their children's mental health and wellbeing. In order to support parents/carers, we will:

- Highlight sources of information and support about common mental health difficulties on our school website.
- Ensure that all parents/carers 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 and Wellbeing Policy easily accessible to parents/carers.
- Share ideas about how parents/carers can support positive mental health and wellbeing in their children through our regular information evenings.
- Keep parents/carers informed about the mental health and wellbeing topics that their children are learning about in PSHCE and share ideas for extending and exploring this learning at home.

8. Supporting Peers

When a student is experiencing mental health difficulties, it can be a difficult time for their friends. Friends often want to support but do not know how and can take on more of a supportive role than is appropriate. 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 experiencing difficulties and their parents/carers.

We will consider:

- What it is helpful for friends to know and what they should not be told.
- How friends can offer support.
- Boundaries between support from friends and support from adults.
- 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.

9. Training

Staff will receive regular training about recognising and responding to mental health difficulties as part of their regular safeguarding training in order to enable them to keep students safe.

Further 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 to developing situations with one or more students.

Suggestions for individual, group or whole school CPD should be discussed with the school CPD Lead and Trust who can also highlight sources of relevant training and support for individuals as needed.

10. Managing Disclosures

If a student discloses concerns about themselves or a friend, to any member of staff, then all staff will respond in a calm, supportive, and non-judgmental manner. All disclosures will be recorded confidentially on MyConcern and only shared with the appropriate authorities if it's necessary to keep the child safe, in line with our Safeguarding Policy.

11. Confidentiality

We must be honest with regards to confidentiality. If 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

We should never share information about a student without first telling them. Ideally, we would receive their consent, though there are certain situations when information must be shared with other members of staff or a parent / carer, social services or external services regarding students who we believe to be in danger of harm. Parents / carers must always be informed if it is deemed necessary and appropriate by the DSL or safeguarding team.

It is always imperative that all disclosures are shared and recorded with the Safeguarding lead on MyConcern. 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. And, if we believe there are safeguarding concerns, you must follow that referral route.

Safeguarding children raises issues of confidentiality that must be clearly understood by all staff/volunteers in schools.

All staff in schools, both teaching and non-teaching staff, have a responsibility to share relevant information about the protection of children with other professionals, particularly the investigative agencies (Children's Services: Safeguarding and Specialist Services and the Police).

If a child confides in a member of staff/volunteer and requests that the information is kept secret, it is important that the member of staff/volunteer tells the child in a manner appropriate to the child's age/stage of development that they cannot promise confidentiality – instead **they must explain that they may need to pass information to other professionals to help keep the child or other children safe.**

Staff/volunteers who receive information about children and their families in the course of their work should share that information only within appropriate professional contexts and must be recorded on MyConcern.

All information obtained by school staff about a pupil will be kept confidential and will only be shared with other professionals and agencies with the family's consent unless there are safeguarding concerns that need to be shared with other professionals and agencies, the parents refuse consent or seeking consent would place the child at further risk.

If the child is under 12, consent to share information about them must be obtained from their parents or carers. Young people aged 12 to 15 may give their own consent to information sharing if they have sufficient understanding of the issues. Young people aged 16 and 17 are able to give their own consent if they are thought to have the capacity to do so under the Mental Capacity Act; otherwise consent should be sought from parents.

Where a child is at risk of suffering significant harm, Barnhill School has a legal duty to share this information with Children's Safeguarding and Social Care (CSSW) and make appropriate referrals. Equally, where a child is subject to a child protection investigation, schools and colleges must share any information about the child requested by CSSW.

Parental consent to making a child protection referral should be sought but if withheld, the referral must still be made and parents made aware of this. Before taking this step, schools should consider the proportionality of disclosure against non-disclosure; is the duty of confidentiality overridden by the need to safeguard the child?

Parental consent to referral can be dispensed with if seeking consent is likely to cause further harm to the child, interfere with a criminal investigation or cause undue delay in taking action to protect the child. However, schools should discuss this with the Child and Family Contact team social worker on a "no names" basis to gain advice on whether this course of action should be taken.

Only relevant information should be disclosed, and only to those professionals who need to know. Staff should consider the purpose of the disclosure, and remind recipients that the information is confidential and only to be used for the stated purpose.

In the event that a child makes a disclosure of neglect or abuse, staff cannot guarantee them confidentiality, but must explain why they have to pass the information on, to whom and what will happen as a result. Parents should also be made aware of the school's duty to share information.

Staff should discuss any concerns or difficulties around confidentiality or information sharing with the Designated Safeguarding Lead and record it on MyConcern.

12. School approach

We take a whole school approach towards the mental health of our students. This means working with parents and carers and with other agencies and partners, where necessary.

WORKING WITH PARENTS AND CARERS

We aim to support parents as much as possible. This means keeping them informed about their child and offering our support at all times. To support parents, we will:

- Highlight sources of information and support about mental health and emotional wellbeing that we have in our school.
- Share and allow parents to access further support.
- Ensure that parents are aware of who to talk to if they have any concerns about their child.
- Give parents guidance about how they can support their child's/children's positive mental health.
- Ensure this policy is easily accessible to parents.
- Keep parents informed about the mental health training our school staff receive and how mental health is covered in our school curriculum.

WORKING WITH OTHER AGENCIES AND PARTNERS

As part of our whole school approach, we will also work with other agencies to support our students' emotional health and wellbeing. This might include liaising with:

- The school nurse
- Pediatricians
- CAMHS
- Counselling services
- Therapists
- Family support workers
- Behavioural support workers
- Stronger Families