



HSaWE-13-MENTAL HEALTH AND WELLBEING

1 INTRODUCTION

1.1 At Heart of England School (“The Trust”) the aim is to promote positive mental health and Wellbeing for every student and member of staff. To do this there are two approaches used:

1.1.1 Whole School Approach:

- Promoting work practices and strategies to promote mental health and Wellbeing and a safe and stable environment, to reduce the impact of mental ill-health.
- Responding to mental ill-health
- Developing practical, relevant, and effective mental health policies and procedures

1.1.2 Specialised, targeted interventions on an individual basis.

1.2 75% of mental health problems in adults have been identified as starting before the age of 18. The Trust wants to make a positive impact on the mental health and Wellbeing of students and staff, building resilience and reducing the stigma that has been attached to mental health problems.

2 ROLE OF TRUST BOARD AND COMMITTEES

2.1 The Trust Board has overall responsibility for this policy, through the People Committee. The Trust is committed to ensuring that positive steps are taken in school to promote a healthy work-life balance for all employees.

2.2 The Trust Board has a ‘duty of care’ towards its employees. This places an obligation on the Trust Board to manage and safeguard the physical and psychological wellbeing of all its employees. To support these objectives, the Trust has a range of policies and guidance in place that aims to support wellbeing in the workplace and to assist in preventing and reducing sickness absence. These policies are in <U://StaffInformation/Policies/STAFF Policies>.

- There are some demands on the Principal and Senior Leadership Team which do not apply to other staff. The Trust will regularly review the demands on Headteachers and Senior Leadership teams and put in place measures to minimise the risks to employee wellbeing as far as is reasonably practicable.
- This includes identifying the causes of work-related stress, such as consistently high workloads, unreasonable expectations, introducing changes without sufficient consultation, employee engagement and addressing issues of workplace conflict at the earliest opportunity, with a particular focus on seeking informal resolution.

3 ROLE OF PRINCIPAL AND SENIOR LEADERSHIP TEAM

3.1 The Principal, Student data administrators, Human Resources and Occupational Health must ensure that personal data, including information about individuals' health, is handled in accordance with the Trust's data protection policy and statutory guidance on processing special categories of personal data.

3.2 The [School Teachers Pay and Conditions Document](#) requires that all teachers and Principals enjoy a reasonable work-life balance:

‘Governing Bodies and Headteachers, in carrying out their duties, must have regard to the need for the Headteacher and teachers at the school being able to achieve a satisfactory balance between



the time required to discharge their professional duties and the time required to pursue their personal interests outside work.'

- 3.3 The same principle is extended to all support staff who work at the school. The Trust and the Principal will make this policy available to all employees at the school.
- 3.4 The Principal and SLT will consider staff needs:
- Seek to identify potential circumstances that may affect the wellbeing of employees and conduct risk assessments,
 - Ensure that employees enjoy a reasonable work-life balance and lead by example in this regard,
 - Support the Trust Board in ensuring that strategies are implemented to effectively manage and, where necessary, reduce employee stress,
 - To assist and support employees with mental health problems and those demonstrating symptoms of stress,
 - Show understanding to employees' personal circumstances and offer additional support with signposting where appropriate e.g., bereavement, separation etc.,
 - Be familiar with the Trust's policies on, equality and diversity, dignity at work, flexible working, leave of absence and tackling inappropriate behaviour in order to support employees. Ensure that all school employees have access to the school's policies,
 - Report and manage ill health related absences in accordance with the Sickness Absence Management Policy and Procedure,
 - Undertake risk assessments to identify health and wellbeing issues related to work and develop appropriate action plans (in conjunction with HR and H&S) to manage risks identified,
 - Ensure training and support is available to all employees including home and agile workers, temporary staff, and volunteers.
- 3.5 The Principal and SLT will consider student needs, enabling students' mental health awareness via education and support, being aware of the many staff who work with each student and ensuring that there is:
- A simple mechanism to report concerns about student mental ill-health,
 - A system to support the student who is struggling with their mental health, including communicating with parents/carers, tutors, academic managers, and teaching staff to provide all-round support,
 - Education for students so that they can feel comfortable discussing their own and their peers' mental health non-judgmentally,
 - A flexible timetable and risk assessment process, if appropriate, such that the student is enabled to continue with their education as much as they are able.

4 WELLBEING PRACTITIONER

- 4.1 The Trust employs a Wellbeing practitioner who works with students and staff to improve their Wellbeing.
- 4.2 The Wellbeing practitioner is one of a team of people who work collaboratively, communicating as appropriate with Pastoral Managers, and DSLs for students.
- 4.3 The Wellbeing practitioner will communicate any concerns about staff to their line manager, the Principal, or the Chair of the Trust Board (as appropriate).



5 CARING FOR STUDENTS

- 5.1 Every student in years 7-11 has a Form Tutor and a Pastoral Manager. Together these form the core support package for a student. A student with significant known mental health needs will receive specific support from their Pastoral Manager, which will be communicated to all relevant staff, by email, Arbor, and briefings.
- Students and their parents/carers will be advised on the support available to them both within school and their local community,
 - This is to enable students to self-refer with confidence and support their peers who would benefit from help.
- 5.2 For students in year 12 and 13 the support comes in the form of a Form Tutor, a year 12 Co-ordinator and a Head of Post-16.
- 5.3 Any member of staff who has a concern about the [mental health of a student](#) must refer their concern using the following process:
- Follow our standard Safeguarding Procedure:
 - Complete a Concern Form,
 - Hand it to a DSL.
- 5.4 The Designated Safeguarding Leads and the Nominated Safeguarding Trustee work with the pastoral support measures, already stated.
- 5.5 If there is a medical emergency which could be attributed to a mental ill-health situation (e.g., self-harm):
- The physical ill-health must be attended to using the Trust's First Aiders, recording on the First Aid recording system, contacting the emergency services (if necessary) and contacting the parent/carer, as usual,
IN ADDITION
 - The mental health concern must also be reported using the [standard process](#).
- 5.6 A student may be referred to external organisations for support such as CAMHS, SOLAR, Positive Choices or other agencies as needed. At a time of acute crisis, we may direct a parent/carer to A&E if the presenting concern warrants this.

6 CARING FOR STAFF

- 6.1 The Trust aims to provide a supportive work environment, operating in a fair and consistent manner, to ensure that no one person feels that they cannot talk about their professional and personal problems and receive appropriate, proportionate support.
- In order to promote a healthy work-life balance staff are required to manage communication with other staff, students, parents/carers, and all other work-based organisations during the hours of 7am to 7pm Monday to Friday, maximum.
 - The Wellbeing practitioner provides some group support however, one-to-one can also be made available under certain circumstances.
 - Staff can be given access to the Trust's sports facilities, for use outside standard lesson times.
- 6.2 If a member of staff shows signs of changes of performance or behaviour which could be interpreted as indicating a situation of extra stress, all staff who notice them are required to provide sympathetic alertness and support, as seems necessary:



- Follow the agreed procedures by communicating with the Line Manager when there are concerns about mental or physical health, of general Wellbeing due to pressures which may be related to external to work.
 - Referring for an Occupational Health review when there are concerns relating to stress, health, or absence from work.
 - Following the processes as outlined in STAFF-13-Sickness Absence during the absence and as part of the return-to-work period:
 - Where possible, agree work-balance solutions, including flexible working practices,
 - Produce risk assessments or safety plans, as appropriate, for the member of staff, particularly where concerns have been raised.
- 6.3 The calendar for the year is planned to consider the pressures, including the impact of seasonal changes in workload, anticipating foreseeable problems, and acting to reduce the effects of these pressures where possible.
- The effectiveness of this planning needs to be reviewed by the staff who are most impacted by it, at regular intervals.
- 6.4 Staff should have the opportunity to provide feedback on their physical and mental health, and their Wellbeing, at least annually. The results must be shared with staff and the impact of the results on future plans must be considered.

7 STAFF LOOKING AFTER THEMSELVES

- 7.1 A member of staff who feels that they are [experiencing difficulties](#) which impact on their Wellbeing must seek help and support from their line manager. This should not be seen as a “last resort.” Early, effective support should be accessed before a situation becomes critical.
- 7.2 Every member of staff must act in a manner which considers and respects the health and safety needs of themselves and others whilst in the workplace.
- 7.3 If possible, be pro-active about what kind of help they feel is needed.

8 STAFF TRAINING

- 8.1 Staff training on Mental Health is available via Citation’s Safety Cloud Health and Safety software package. It has been allocated to all staff.
- 8.2 Further training may accompany the regular child protection/safeguarding training, so that students can be kept safe.
- 8.3 Further training for those staff who need it will be allocated as part of their job role and the Performance Management process.
- 8.4 Developing situations within the student population may require other training, these will be resolved as required.

9 EDUCATING STUDENTS ABOUT MENTAL HEALTH

- 9.1 From September 2020 The new Personal, Social, Health and Economic education (PSHE) has been implemented incorporating Relationships, Sex and Health education (RSHE). The curriculum has a specific strand for Health and Wellbeing.
- 9.2 This is delivered in year group, age-appropriate classes. There is a focus on emotional literacy and language used to express mental health and Wellbeing. The content of the programme will be regularly reviewed to suit the needs of the year groups. The emphasis will be on supporting students to develop the skills, knowledge, language, and confidence to seek help for themselves/others.



- National evidence-based research will be used to feed into all teaching of mental health and Wellbeing.
 - Staff, student, and parent/carer feedback is welcomed to positively influence the material presented to the students.
 - THE PSHE lead and the wellbeing practitioner run assemblies on topic which relate to the many manifestations of mental health which are common to the period of secondary education, with appropriate and timely advice on management of stress relating to exams, relations and feeling overwhelmed.
 - Mental health week is promoted as part of extending this knowledge.
- 9.3 At KS3 there is a timetabled lesson every two weeks. Multiple lessons are focused on mental health and wellbeing.
- 9.4 At KS4 mental health and wellbeing is addressed as part of a drop-down when the focus is on PSHE.
- 9.5 Both KS3 and KS4 have access to “Life Lessons” which supports discussions on themes during tutor times

10 KS5 PSHE EDUCATION INCLUDES MENTAL HEALTH AND WELLBEING IS PROVIDED USING THE TUTOR SYSTEM. WHEN A STUDENT DISCLOSES THAT THEY ARE CONCERNED

- 10.1 A student may choose to express concerns about themselves or a peer to any member of staff. All staff need to be aware of the best way to respond to a disclosure: effectively this is exactly the same process as will be used when a safeguarding disclosure takes place.
- Initial response must be calm, supportive, and non-judgmental. Notes must NOT be taken.
 - Do NOT
 - Offer advice.
 - Consider why this has happened.
 - Promise confidentiality. You must make it clear that you will be telling someone.
 - Diagnose. You are not the right person to diagnose a mental health condition.
 - After the student has explained the situation do:
 - Complete a concern form as soon as possible.
 - Hand it onto a DSL.
 - Discuss the phrases/words used and their emotional presentation.
 - Be clear of the difference between facts and observations/opinions.
 - Notifying parents/carers
 - Parents/carers will be contacted by a DSL, Leadership Team or Year team member depending upon the nature/severity of the concerns.

11 RECOGNISING WARNING SIGNS

11.1 Always take any of these warning signs seriously:

- Physical signs of harm, which are repeated or appear non-accidental,
- Changes in eating habits,
- Changes in sleeping habits,
- Increased isolation from friends/family; becoming socially withdrawn,
- Changes in activity or mood or both,
- An unexpected drop in academic achievement,
- Overhearing talk about or jokes about:



- Self-harm,
- Suicide,
- Drugs,
- Alcohol,
- Failure,
- Uselessness,
- Hopelessness,
- Clear evidence of substance abuse,
- Unexpected secretiveness, which may be inappropriate changes of clothing (e.g., long sleeves in hot weather), or linked to another sign (e.g., changes in eating habits, obsessive behaviour, getting changed for PE in a cubicle, or hiding during PE lessons),
- Lateness to/absence from school (reduced attendance),
- Repeated occurrence of pain/nausea with no obvious physical cause
- Loss of interest in activities which used to be important.

12 ASSESSING THE PROBLEM

12.1 It is important to consider:

- The duration of the changes,
- The apparent severity,
- The degree of impact on the person,
- The complexity of the both the manifestation of the issues and the people around the person (in and out of school),
- The situation in context considering as many factors as are available to those offering support.

12.2 Health Care Plans, Safety Plans, Risk Assessments

12.3 An individual health care plan, safety plan or risk assessment may be the best way to document the support needed by the individual with a mental ill-health condition which affects their ability to function as usual whilst in school.

- This plan must involve as many people as appropriate:
 - The student/member of staff,
 - Student's parent/carers,
 - Support workers (e.g., social workers, relevant health professionals),
 - School based supporters (Tutor, Pastoral Manager etc.).
- The plan should include:
 - Details of the condition,
 - Special requirements/precautions,
 - Level or risk to self/others,
 - Prescribed or over the counter medication and expected/actual side effects,
 - Actions and contacts in an emergency,
 - Preventative measures.

13 SUPPORTING PARENTS/CARERS

13.1 Sources of information will be presented on the school website and via links to appropriate social media.

13.2 Parents/carers will be given information when their child starts at the school about who to talk to about concerns. These concerns can be about their own child, or one of their peers.

13.3 This policy is presented the school website so that parents/carers can access it.



- 13.4 KS3 parents/carers are informed about the topics discussed in the PSHE programme by the PSHE lead. KS4 and KS5 parents are given the information after the topics are delivered to promote healthy discussion, The information is not given beforehand, to enable open discussion, with preconceptions limited.
- 13.5 Before disclosing a possible, currently undiagnosed, condition relating to a student's mental ill-health or Wellbeing it is important to consider:
- The benefits of meeting, preferably face to face,
 - The best time and place for the meeting,
 - The best people to attend, those who have the best relationship with the parents/carers,
 - The ultimate aim of the meeting, what can be given to the parents/carers so that they have useful next steps/sources of information.
 - The information available to the school about the home environment.
- 13.6 Parents/carers may be distressed to learn about their child's issues. They may also be relieved that their concerns are shared by the school. It is important to give the parents/carers time and space to process the information that has been given to them, and to be non-judgmental about their initial reaction.
- A follow-up phone call (or several) or meeting must take place in order so that they can ask questions and feedback what has been happening. These conversations must be recorded on the CURA system.

14 SUPPORTING PEERS

- 14.1 When a person is experiencing an episode of mental ill-health it can be difficult for the people around them to provide support, there are occasions when extra help is required (e.g., self-harm or eating disorders can be promoted to the peers by the sufferer). Additional support will be considered on a case-by-case basis but can always be requested. The support offered will be guided by conversations with the person experiencing difficulties and may be one-to-one or group based.
- 14.2 Peers will also be directed to resources which they can use when they are by themselves, safe sources of information about what their peer is experiencing and healthy ways to manage the emotions that they may be feeling. It may be appropriate to communicate with the peer's parents/carers, in which case great care will be taken to ensure confidentiality of the person who is experiencing the mental health issue.

15 RESOURCES

- 15.1 [Six ways to Wellbeing checklist](#)
- 15.2 <https://www.corc.uk.net/outcome-experience-measures/revised-childrens-anxiety-and-depression-scale-rcads/>
- 15.1 <https://www.nhs.uk/nhs-services/mental-health-services/>
- 15.2 https://www.youngminds.org.uk/about-us/media-centre/mental-health-statistics/?gclid=EAlaIqobChMIn-atxZK3gQMVktdRCh2CZQBxEAAAYAiAAEgLmLPD_BwE
- 15.3 <https://www.bsmhft.nhs.uk/our-services/>
- 15.4 <https://www.kooth.com/>

16 AUTHOR

- 16.1 The author of this policy is The Compliance Officer. They should be contacted for any points of clarification or suggested future amendments.



17 VERSION CONTROL

Policy Number	HSaWE-13
Policy Name	Mental Health and Wellbeing
Version Number	00
Publication Method	External A copy must be made available in U:\Staff Information\Policies\HSaWE
Approved by	Full Trust Board
Date of Approval	October 2023
Key changes since previous version	1. This is a new policy
Next Review Date	October 2024