



WANSTEAD HIGH SCHOOL

Mental Health Policy

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Related Policies:

- Safeguarding and Child Protection Policy
- Behaviour Policy
- Children with Health Needs who Cannot Attend School Policy
- Supporting Pupils with Medical Conditions Policy
- Anti-Bullying Policy

1. Introduction

At Wanstead High School we are committed to supporting the mental health and wellbeing of our pupils.

The emotional wellbeing of children is just as important as their physical health. Good mental health allows children and young people to develop the resilience to cope with whatever life throws at them and grow into well-rounded, healthy adults.

We aim to promote positive mental health for every member of our pupil community. We pursue this aim using both whole school approaches and specialised, targeted approaches aimed at vulnerable pupils.

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. In an average classroom, three children will be suffering from a diagnosable mental health issue. By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for pupils affected both directly and indirectly by mental ill health.

This policy has been developed in line with the following policies and guidance:

- The Children Act 1989
- The Equality Act 2010
- The Education Act 2002
- The Education and Inspections Act 2006
- Keeping Children Safe in Education 2024
- Mental Health and Behaviour in Schools 2018
- Special educational needs and disability code of practice: 0 to 25 years
- Supporting pupils at school with medical conditions 2015
- Independent School Standard Regulations 2010
- Behaviour and discipline in schools, DfE 2016
- Behaviour in Schools, DfE 2024
- Learning outcomes for senior mental health leads in schools and colleges, DfE June 2021
- Relationship education, relationships and sex education (RSE) and health education, DfE

This policy has also been developed using advice and resources from Anna Freud, Trauma Informed Schools UK, Young Minds, NSCPCC, Mental Health Foundation, Papyrus, PSHE Association, Samaritans and The Charlie Waller Trust alongside feedback and guidance from pupils at Wanstead High School.

2. Aims

The aim of this policy is to demonstrate our commitment to the mental health of our pupils and to ensure all members of our community have a solid understanding of how to spot and support a child experiencing mental health difficulties.

We will do this by:

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

We will promote a healthy environment by:

- Promoting positive mental health and emotional wellbeing in all pupils.
- 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 pupils' voices and giving them the opportunity to participate in decision making.
- Celebrating each pupil for who they are and making every pupil feel valued and respected.
- Adopting a whole school approach to mental health and providing support to any pupil that needs it.
- Raising awareness amongst staff and pupils about mental health issues and their signs and symptoms.
- Enabling staff to respond to early warning signs of mental-ill health in pupils.

The following principles underpin this policy:

- Duty of care is, as always, paramount.
- The child or young person is central to the whole process and should be given appropriate priority by all involved.
- All school staff will adhere to a consistent response to and understanding of mental health.
- The child or young person will be supported to access service(s) which will assist the child or young person with opportunities and strategies to look after their mental health

3. Scope

In line with the law, this policy defines a child as anyone under the age of 18 years.

This policy applies to all members of staff in our school, including all permanent, temporary and support staff, governors, volunteers, contractors and external service or activity providers. It outlines our approach to promoting pupil mental health and wellbeing. It should be read and understood alongside our other relevant school policies.

The Headteacher has overall responsibility for the policy and its implementation and liaising with the governing body, parents/carers, Local Authority and outside agencies.

This policy will be reviewed every year. This is so that it remains up to date, useful, and relevant. We will also regularly review it in accordance with local and national policy changes.

4. Key Staff Members

All staff members have a responsibility to promote the mental health of pupils and each other. However, certain staff members have a specific role in the process. These are:

- Designated Safeguarding Lead & Senior Lead for Mental Health: Ms Donna Cini, Director of Inclusion
- Deputy Designated Safeguarding Lead & Senior Lead for Mental Health: Mrs Helise Martin, Deputy Headteacher
- SENDCO: Ms Liz Worham
- School Counsellor: Ms Vineeta Vashisht
- Learning Mentor: Miss Farah Chouhdry
- Learning Mentor and Well Being Supervisor: Mrs Satnam Kaur

5. What is Mental Health?

Mental health is a broad term referring to the social, psychological and emotional wellbeing of individuals. Maintaining good mental health is an important part of leading a productive and fruitful life and many of us take steps to ensure we have good mental health by doing things, such as surrounding ourselves with caring friends and family, doing hobbies we enjoy, eating and sleeping well, exercising, working in a field we are passionate about and so on.

It is important to recognise that we all have mental health, just as we all have physical health. This is a key message which staff at Wanstead High School regularly explore with our young people.

It is also important to distinguish between mental health and mental illness; where the latter is a clinically diagnosable illness affecting how a person thinks and feels, behaves and interacts with other people and this can range from anxiety or depression, to eating disorders, bipolar or schizophrenia. These illnesses are a result of biological, developmental and/or social factors and can be managed with cognitive and behavioural psychological therapies, psychosocial support and medically in the same manner as a physical disease would be treated.

What is considered good Mental Health?

Good mental health is characterised by a person's ability to fulfil a number of key functions and activities, including:

- The ability to learn.
- The ability to feel, express and manage a range of positive and negative emotions.
- The ability to form and maintain good relationships with others.
- The ability to cope with and manage change and uncertainty.

In order to promote positive mental health, it is important that we are aware of protective factors that can enable pupils to be resilient when they encounter problems and challenges. We aim to create a safe environment where our pupils can develop a sense of belonging and feel able to trust and talk openly with adults about any challenges they may be facing.

Things that can help keep children and young people mentally well include:

- being in good physical health, eating a balanced diet and getting regular exercise;
- having time and the freedom to explore, indoors and outdoors;
- taking part in local activities for young people;
- feeling loved, trusted, understood, valued and safe;
- being interested in life and having opportunities to enjoy themselves;
- being hopeful and optimistic;
- being able to learn and having opportunities to succeed;
- accepting who they are and recognising what they are good at;
- having a sense of belonging in their family, school and community;
- feeling they have some control over their own life;
- having the strength to cope when something is wrong (resilience) and the ability to solve problems.

6. ACEs and Vulnerable Groups

The role we play in promoting the resilience of our pupils may be particularly important for children who may have suffered adverse childhood experiences (ACEs). Wanstead High School is committed to applying a trauma informed approach when working with young people who are experiencing difficulties or demonstrating challenging behaviours.

Adverse childhood experiences range from experiences that directly harm a child (such as suffering physical, verbal or sexual abuse and physical or emotional neglect), to those that affect the environment in which a child grows up (including parental separation, domestic violence, mental illness, problematic alcohol or drug use, and a family member being in prison). Research shows that the more ACEs people suffer the greater their risk of mental illness throughout life.

There are certain risk factors that make some children and young people more likely to experience problems than other children, but they don't necessarily mean difficulties are bound to come up or are even probable.

Children identified as Children in Need and supported by children's social care alongside looked-after and adopted children may also have faced such risk factors. Socio-economic disadvantage is another identified

risk factor for mental health, so this may include children currently or previously receiving Free School Meals and eligible for the Pupil Premium.

In recent years, we have seen an increase in the incidence of mental health concerns for children and young people with complex special educational needs and disabilities (SEND). Research suggests a child with a learning disability is six times more likely to present with a mental health difficulty throughout their life than a child without one (Emerson and Hatton, 2007). Studies also show a need for greater awareness of these issues when specific conditions are considered. For example, 70 percent of children with autistic spectrum disorders (ASD) will have a mental health concern at some point in their life (National Autistic Society, 2010).

Other factors include:

- having a long-term physical illness;
- having a parent who has had mental health problems, problems with alcohol or has been in trouble with the law;
- experiencing the death of someone close to them;
- having parents who separate or divorce;
- having been severely bullied or physically or sexually abused;
- living in poverty or being homeless;
- experiencing discrimination, perhaps because of their race, sexuality or religion;
- acting as a carer for a relative, taking on adult responsibilities (Young Carers).

Where vulnerable pupils or groups are identified within the school, provision will be made to support and promote their positive mental health.

7. Behaviour and Mental Health

This policy acknowledges the school's legal duties under the Equality Act 2010 in respect of safeguarding and in respect of pupils with SEND.

Part 6 of the Equality Act 2010 defines a disabled person as 'someone who has a physical or mental impairment which has a substantial and long-term effect on his or her ability to carry out normal day to day activities'. Pupils to whom this definition applies will receive support and intervention as outlined below but will also benefit from the two key duties summarised as:

- a less favourable treatment duty
- a reasonable adjustment duty

The school will make 'reasonable adjustments' to the application of its Behaviour Policy in consultation with the school SENDCO. Reasonable adjustments are aimed at preventing discrimination and reducing the risk of exclusion.

We aim to provide a structured school environment with clear expectations of behaviour, which are reinforced with a clear system of rewards and sanctions. This works alongside a graduated response to behavioural issues which pupils may display.

Pupils who are displaying persistent poor behaviour will be discussed in half termly Social Inclusion meetings attended by the Deputy Headteacher for Inclusion, Director of Inclusion, SENDCO and associated Head of Year, including discussing if there is a need for further assessment from outside agencies.

8. Warning Signs

School staff may become aware of warning signs which indicate a pupil 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 follow procedures for reporting safeguarding concerns.

Where there are **concerns or disclosures of self-harm or suicide**, staff must **report this immediately following the school's Safeguarding Procedures** (before the end of the school day) and **ensure the child is supervised at all times**. A member of the Safeguarding Team will meet with the child and make an assessment, involve external agencies if required, and decide whether the child is safe to go home.

Staff will be able to identify a range of behaviour and physical changes, including:

- Physical signs of harm
- Changes in eating and sleeping patterns
- Increased isolation from friends and family and becoming socially withdrawn
- Changes in mood or energy levels
- Talking and/or joking about self-harm and/or suicide
- Drug and alcohol abuse
- Feelings of failure, uselessness, and loss of hope
- Secretive behaviour
- Repeated physical pain or nausea with no evident cause
- Truancy PE or getting changed secretly
- Rapid weight loss or gain
- Covering parts of the body that they wouldn't have previously
- Clothing unsuitable for the time of year, eg. a large winter coat in summer
- Changes to level of personal hygiene
- Negative behaviour patterns, eg. disruption

Staff will also be able to identify a range of issues, including:

- Attendance and truancy
- Punctuality and lateness
- Changes in educational attainment and attitude towards education
- Family and relationship problems

Finally, staff will be well placed to identify any additional needs arising from difficulties that may impact a child's mental health and wellbeing, such as bereavement and health difficulties.

9. Managing Disclosure

A pupil may choose to disclose concerns about themselves or a friend to any member of staff, so all staff need to know how to respond appropriately to a disclosure. If a pupil chooses to disclose concerns about their own mental health or that of a friend to a member of staff, the member of staff's response should always be calm, supportive and non-judgemental. Staff should listen rather than advise, and our first thoughts should be of the pupil's emotional and physical safety rather than of exploring 'Why?'.

Where there are **concerns or disclosures of self-harm or suicide**, staff must **report this immediately following the school's Safeguarding Procedures** (before the end of the school day) and **ensure the child is supervised at all times**. A member of the Safeguarding Team will meet with the child and make an assessment; involving external agencies if required, and decide as to whether the child is safe to go home.

Focus on listening

If a pupil has come to you, it is because they trust you and feel a need to share their difficulties with someone. Let them talk. Ask occasional open questions if you need to in order to encourage them to keep exploring their feelings and opening up to you. Just letting them say what they are thinking will make a huge difference and marks a huge first step in recovery. Up until now they may not have admitted even to themselves that there is a problem.

Don't talk too much

The pupil should be talking at least three-quarters of the time. If that is not the case then you need to redress the balance. You are there to listen, not to talk. Sometimes the conversation may lapse into

silence. Try not to give in to the urge to fill silence, but rather wait until the pupil does so. This can often lead to them exploring their feelings more deeply. Of course, you may interject occasionally, perhaps with questions to the pupil to explore certain topics they have touched on more deeply, or to show that you understand and are supportive. Don't feel an urge to over-analyse the situation or try to offer answers. For now, your role is simply one of a supportive listener.

Don't pretend to understand

The concept of a mental health difficulty such as an eating disorder or obsessive-compulsive disorder (OCD) can seem completely alien if you have never experienced these difficulties first hand. You may find yourself wondering why on earth someone would do these things to themselves, but don't explore those feelings with the sufferer. Instead listen hard to what they're saying and encourage them to talk.

Don't be afraid to make eye contact

It is important to try to maintain a natural level of eye contact. If you make too much eye contact, the pupil may interpret this as you staring at them. They may think that you are horrified about what they are saying or think they are a 'freak'. On the other hand, if you don't make eye contact at all then a pupil may interpret this as you being disgusted by them – to the extent that you cannot bring yourself to look at them. Making an effort to maintain natural eye contact will convey a very positive message to the pupil.

Acknowledge how hard it is to discuss these issues

It can take a young person weeks or even months to admit to themselves they have a problem, let alone share that with anyone else. Acknowledging both how brave they have been, and how glad you are they chose to speak to you, conveys positive messages of support to the pupil.

Agree next steps

Never leave this kind of conversation without agreeing next steps. These will be informed by our school policies. If you are not the Designated Safeguarding Lead you will need to inform the child that you will share their disclosure with one of the Designated Safeguarding Leads in order for the right support to be offered to them.

Never make promises

Above all else, a pupil wants to know they can trust you. That means if they want you to keep their issues confidential and you cannot then you must be honest. Explain that, whilst you cannot keep it a secret, you can ensure that it is handled within the school's policy of confidentiality and that only those who need to know about it in order to help will know about the situation. You can also be honest about the fact you don't have all the answers or aren't exactly sure what will happen next.

After the initial disclosure, the school's Designated Lead for Mental Health, Donna Cini, or in her absence one of the Designated Safeguarding Leads, will make further assessment in order to ascertain next steps.

It is important to ask the pupil what they would like to happen next.

- What kind of support would they like to receive?
- Which of their parents/carers would they like the school to liaise with?
- Would they like to be present in a meeting whereby next steps are discussed with their parents?

Whilst school policies are required to be followed it is important to include the child's voice in the decision-making process and bring them on the journey whilst keeping them safe.

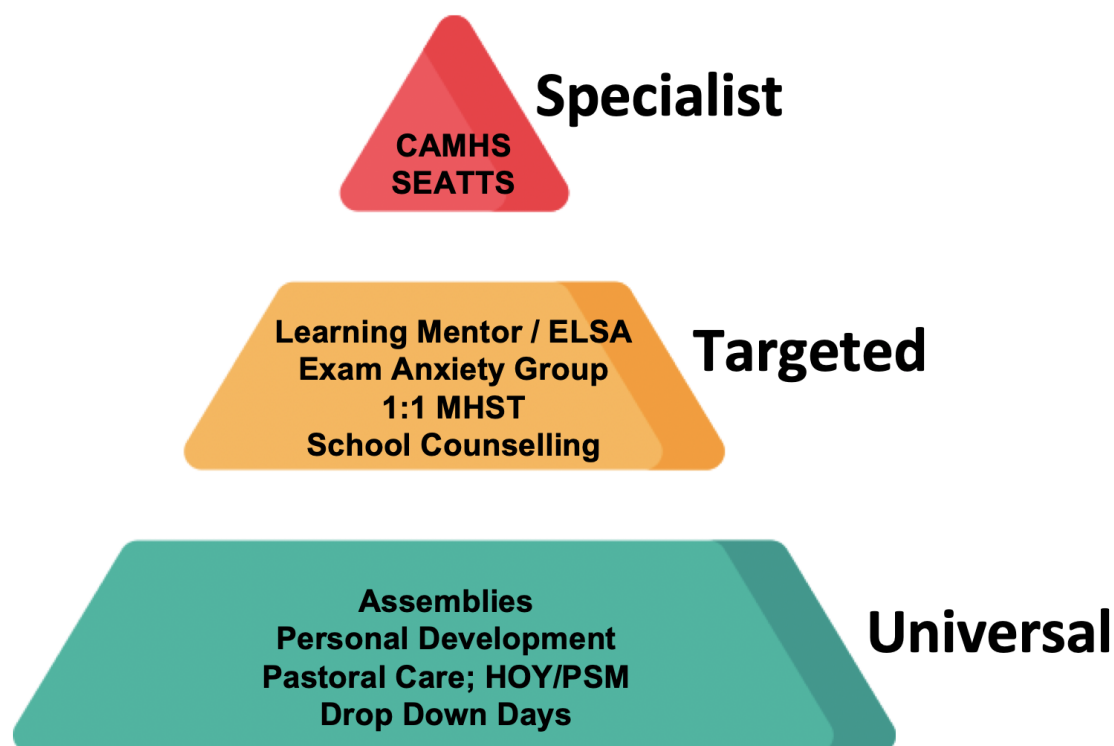
Where a pupil has disclosed any form of emotional difficulty the school should share this with their parents/carers unless doing so would place them at risk of harm.

The Designated Lead for Mental Health will work with the pupil, their parents/carers and external agencies notably CAMHS (Child and Adolescent Mental Health Services), where necessary in order to decide the best course of action for the child.

10. Universal Support for all Pupils

As part of our school's commitment to promoting positive mental health and wellbeing for all pupils, our school offers support to all pupils by:

- Raising awareness of mental health during assemblies, tutor time, Personal Development lessons and during mental health awareness week.
- Signposting all pupils to sources of support including external and online support.
- Having open discussions about mental health during lessons.
- Providing pupils with avenues to provide feedback on any elements of our school that is negatively impacting their mental health.
- Monitoring all pupils' mental health through assessments.
- Appointing a senior mental health lead with a strategic oversight of our whole school approach to mental health and wellbeing.
- Offering pastoral support through Heads of Year and Pastoral Support Managers.
- Having a dedicated mental health team which includes a full time School Counsellor, Learning Mentors and Emotional Literacy Support Assistants (ELSAs).
- Having a dedicated email address talktous@wansteadhigh.co.uk for pupils to report concerns about themselves or their peers.
- Having a 'talk to me' slip which pupils can complete in order to request a check in with a member of the pastoral team.
- Working closely with external agencies including CAMHS, the Mental Health Support Team, the Eating Disorder Service, Early Intervention and Children's Social Care.



Wanstead High School Mental Health Offer

11. Identifying Support

It is important to acknowledge any emotional difficulties a child is facing and we will have packages of support available for pupils who are experiencing mental health difficulties and/or have been diagnosed with a mental health illness.

There is a range of support available both in school and via external agencies. The Designated Lead for Mental Health will advise pupils and their parents/carers which of the following support options may be suitable.

Referrals for all in-house services can be made by any member of school staff, as well as parent/carers and pupils themselves. All referrals will be screened by the Designated Lead for Mental Health who will ensure the intervention is the appropriate level of support for the child.

Parents wishing to discuss support for their child, can contact their child's individual Head of Year, Pastoral Support Manager or the Director of Inclusion Ms Cini via email; d.cini@wansteadhigh.co.uk. We will then be able to advise which intervention may be best for your child

Internal Support

School Counsellor

We have a full time School Counsellor, Ms Vashisht, who is a member of the BACP (British Association for Counselling and Psychotherapy). One-to-one sessions aim to provide a safe space for pupils to discuss parts of their life which are troubling them and to understand how these issues may be affecting them individually. The purpose of sessions is to discover better ways of coping with these issues more independently.

Counselling may be suitable for pupils who have experienced a bereavement or trauma and/or where anxiety is manifesting in physical symptoms which is impacting daily functions such as sleeping, eating and socialising. Where pupils have been seen and assessed by CAMHS and counselling has been identified as the appropriate level of support, pupils will be added to the school counselling waiting list.

Sessions take place on the school site during the school day and parents receive confirmation when their child has been allocated to the School Counsellor. The intervention is reviewed every 6 weeks where a decision is made as to whether the pupil can exit the intervention, or whether further sessions are required.

Learning Mentors

We have two full time Learning Mentors who work with pupils to address barriers to learning. This is through both one-to-one sessions and group sessions. Learning Mentors provide guidance to pupils who may be experiencing challenges with their behaviour, peer group issues, transition to secondary school, alongside any difficulties they may be facing outside of school. Learning Mentors use a range of techniques including direct work and role play to help pupils communicate their thoughts and feelings.

Mentoring may be suitable for pupils requiring support with forming and sustaining relationships with peers, managing social isolation and low-level anxiety in social situations. Learning Mentors also provide a safe space for pupils experiencing difficulties due to unforeseen circumstances such as bereavement and family circumstances.

Wellbeing Room

Our Wellbeing Room is a space aimed to support pupils who are experiencing challenges and may benefit from being in a low sensory environment. The Wellbeing Room is led by Mrs Kaur who is one of our Learning Mentors and ELSAs. Pupils may be referred to the Wellbeing Room by a member of the Pastoral Team and placed on to one of the support pathways offered.

Support Pathway	Support Pathway Summary	Desired Outcomes
1. Special Arrangement Attenders	<p>Pupils highlighted by SLT, Heads of Year or Pastoral Support Managers as requiring a space to check-in and receive assistance with difficult circumstances that affect wellbeing and can impact on a pupil's ability to get through the school day.</p> <p>Break and lunchtime support for pupils requiring a quieter space during unstructured times.</p> <p>1:1 mentoring intervention which can support a variety of concerns for example low attendance, returning from a period of medical absence, bereavement, an unsettled period at home, etc.</p>	<ul style="list-style-type: none"> • Positive and calm start to the school day • Improved attendance • Successful full-time reintegration into mainstream classes • Supported reintegration into unstructured times • Reinforcement of social skills and coping mechanisms
2. Sessional Attenders	<p>Pupils with identified well-being needs who will benefit from specific ELSA interventions aimed to address challenges with Anxiety, Self Esteem and Social/Peer group issues.</p> <p>Pupils who are completing the Your Choice programme, aimed to address issues around contextual safeguarding.</p> <p>Pupils may also attend in a sessional capacity if they cannot access a particular area of the curriculum for a medical or mental health issues; for example, unable to participate in Dance, Drama or PE due to physical demands of the subject.</p>	<ul style="list-style-type: none"> • Improved attendance and punctuality • Reduction in behaviour incidents • Reduction in internal exclusions and suspensions • Improved confidence and ability to express emotions and deal with conflict/stressors • Development and application of self-help strategies
3. Intensive attenders	<p>Pupils who are struggling to access the curriculum due to ongoing wellbeing concerns which have led to extended periods of absence; typically, pupils experiencing Emotionally Based School Avoidance (EBSA) or pupils returning to school on a phased return following an extended period of absence.</p> <p>Pupils may have a personalised timetable which may include identified daily sessions spent in the wellbeing room to receive structured intervention or access their learning outside of the classroom environment via Google Classroom.</p> <p>During time in the Wellbeing Room pupils will be given activities which will help them to reflect on their feelings and promote strategies to help overcome either their barriers to learning, personal difficulties or struggles with attendance.</p>	<ul style="list-style-type: none"> • Improved attendance and punctuality • Successful full-time reintegration into mainstream classes • Improved confidence and ability to express emotions and deal with conflict/stressors • Development and application of self-help strategies • Reconnection with the curriculum enabling pupils to complete GCSE qualifications at KS4

Mental Health Support Team

We are fortunate to be a Mental Health Support Team school. The Mental Health Support Team (MHST) consists of Educational Psychologists and Educational Mental Health Practitioners. They are part of the Redbridge Educational Well-Being Team within the Educational Psychology Service. The MHST provides children and young people who are experiencing mild to moderate mental health difficulties such as anxiety, low mood and behavioural challenges. This often involves working directly with the young person for 5-8 sessions.

This intervention may be suitable for pupils experiencing anxiety manifesting as physical symptoms which are impacting daily functions such as sleeping, eating, socialising; pupils displaying anxiety with no secondary needs or concerns; and pupils displaying low mood or refusal to communicate for periods of time.

Wellbeing Mornings

Our School Counsellor facilitates Group sessions held during Tutor Time with an allocated day for each Year Group. These sessions provide a space for pupils to receive initial support and feedback for individual problems. Pupils can drop in to these sessions without an appointment.

These sessions are suitable for pupils experiencing difficulties with forming and sustaining relationships with peers, low-level anxiety in social situations and family circumstances which may be creating challenges. Often these sessions form a positive pre-requisite for pupils who wish to engage in 1:1 support or pupils who may already be on the waiting list for individual support.

Tuesday 8:30 – 9am	Year 10 & 11
Wednesday 8:30 – 9am	Year 9
Thursday 8:30 – 9am	Year 7 & 8

Boxall Profile/School Support Plan

Where there has been significant impact to a pupil's emotional well-being and/or school attendance a Boxall Profile/School Support Plan will be considered.

Similar to an Individual Healthcare Plan which is allocated to pupils with medical conditions, a School Support Plan can support those pupils who have diagnosed mental health conditions such as anxiety and depression, and those pupils whose attendance and progress is hampered by an emotional barrier to learning. A Boxall Profile may be used to support this.

School Support Plans are drawn up by a member of the Safeguarding Team and/or Heads of Year in partnership with pupils, parents and any external agencies who may be involved, and in liaison with the Redbridge Inclusion Team. Pupils will also require a Pupil Profile which helps staff to support pupils in a way which meets their needs.

Referrals to External Agencies

There may be occasions when pupils require support from specialist external agencies such as CAMHS, the Eating Disorder Service, Social Care and/or the Early Help Service. The Safeguarding Team can advise on which support may be required.

- **CAMHS (Child and Adolescent Mental Health Services)**

CAMHS offers assessment and help to children, young people and their families with significant emotional and behavioural difficulties or who suffer with anxiety. CAMHS also helps young people who may have ASD, Attention Deficit Hyperactivity Disorder (ADHD), eating difficulties or other emotional difficulties.

The school work with CAMHS very closely and liaises with it regarding pupils who may not be known to their service and pupils who have existing conditions and care plans. The school is able to refer directly to CAMHS and can discuss the referral process with parents/carers in order to achieve the best possible outcomes for our pupils.

Where pupils disclose self-harm and/or suicidal thoughts, the school will often speak to CAMHS to receive same day advice and guidance. This will often involve a referral to the service, and on some occasions will require pupils to attend their local hospital on the same day as their disclosure so they can receive an assessment in order to keep them safe.

- **Eating Disorder Service**

The eating disorder service at North East London NHS Foundation Trust (NELFT) is a specialist outpatient service for young people and adults. The service aims to bring hope and confidence to those who have an eating disorder and to enable them to take back control of their life by overcoming their eating disorder. As well as working with individuals, it also works with families and carers to help them support the person they care for who has an eating disorder. The eating disorder service works closely with other NELFT services such as CAMHS, adult mental health services and inpatient services.

- **Educational Psychologist**

Educational psychologists work with schools to help them look at the needs of the whole child so they are able to be included fully in class, school and community life.

Pupils are identified for Educational Psychologist input via their Heads of Year who will look at various indicators to inform whether or not further assessment may be required. Alongside the SENDCO this will be discussed with parents/carers who are required to consent to this intervention. On occasion CAMHS will also contact the school and request a child be seen by the Educational Psychologist as part of a larger assessment.

When an Educational Psychologist assess a child, they will collect information on the child by:

- talking to the child's current or previous teachers;
- talking to the child's parents;
- analysing the child's school work and approach to learning;
- observing the child in the classroom;
- considering the child's emotional and social development and behaviour;
- talking to the child themselves.

After this process has taken place, the Educational Psychologist will produce a report which will detail any recommendations for further assessments or in-house interventions. The report will be shared with parents/carers.

- **S.E.a.T.S.S (Specialist Education and Training Support Service)**

S.E.a.T.S.S. is a specialist SEND advisory service supporting children and young people aged from 0-25 years and linking closely with health and other professionals.

S.E.a.T.S.S. offers a wide range of SEND support, advice and training opportunities for schools and settings to enable them to deliver high quality inclusive education. It also provides advice and support for individual children with SEND to ensure that the people who work with them and their families are equipped to understand and meet their individual needs.

S.E.a.T.S.S is made up of 4 teams: Autism/Social Communication, Cognition and Learning; Physical and Complex Medical Needs; Sensory Needs (including MSI (multi-sensory impairment), Vision and Hearing) and Training; and Special Projects. In addition, S.E.a.T.S.S. has Social Emotional and Mental Health (SEMH) specialist teachers in each of its teams, who work closely together delivering coordinated support through personalised approaches and interventions, modelling strategies, supporting planning, training etc. This support will be tailored for schools and the pupils we support.

Where external factors are having an impact on a child's mental health, the Designated Safeguarding Leads will also consider whether referrals to Children's Services or Early Intervention are required. This will be discussed with parents/carers unless doing so places the child at risk and/or Children's Services advise otherwise.

12. Working with Parents/Carers

As detailed above, where concerns have been identified in relation to a pupil's mental health, the Designated Lead for Mental Health will work with parents/carers in order to decide the best course of action for the child. This will often involve the child's Head of Year and where necessary the school's SENDCO.

We aim to support parents as much as possible and recognise addressing a child's mental health can often be confusing and upsetting. We will aim to keep parents informed about their child's wellbeing and ensure they are aware of the key professionals working with their child.

To further 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 – including out of hours services.
- 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.
- Keep parents informed about the mental health training our school staff receive and how mental health is covered in our school curriculum.

The school's website will be regularly updated to include support listed above.

13. Whole School Approach

The Personal Development curriculum promotes pupils' wellbeing through an understanding of their own and others' emotions and the development of healthy coping strategies. It also contributes to safeguarding, providing pupils with knowledge, understanding and strategies to keep themselves healthy and safe, as well as equipping them to support others who are facing challenges. Finally, talking openly about mental health issues is an effective means of breaking down any associated stigma.

The emphasis should always be on developing pupils' knowledge, understanding, skills, language and confidence to seek support, as needed, for themselves or others. They should understand when to seek help, what help is available, and the likely outcome of seeking support.

We recognise that by the end of KS4 and in relation to mental wellbeing pupils should know:

- how to talk about their emotions accurately and sensitively, using appropriate vocabulary;
- that happiness is linked to being connected to others;
- how to recognise the early signs of mental wellbeing concerns;
- common types of mental ill health (eg. anxiety and depression);
- how to critically evaluate when something they do or are involved in has a positive or negative effect on their own or others' mental health;
- the benefits and importance of physical exercise, time outdoors, community participation and voluntary and service-based activities on mental wellbeing and happiness.

The importance of positive mental health is already embedded through Personal Development lessons, Drop Down Days, Tutor Time and Whole School Assemblies. Pupils are taught to explore healthy lifestyles and relationships, self-esteem and self-worth and are signposted to key members of staff who can help and advise with any concerns they may have regarding the mental health of themselves or a peer.

14. How to Get Support

This policy offers a framework for supporting pupils with Mental Health concerns in an effective and supportive context in order to help staff, pupils and parents be confident in the identification and subsequent response to Mental Health within our school. Our procedures will be annually reviewed and updated in accordance with new and revised legislations, policies, guidance, and pupil and parent voice.

Pupils can:

- share concerns about their own mental health or a peer's mental health with their Form Tutor, Head of Year, Pastoral Support Manager and members of the Safeguarding Team;
- use the school's dedicated email address to share concerns talktous@wansteadhigh.co.uk
- fill in a 'talk to me' request slip via Pupil Reception and a member of the Pastoral Team will check in with them
- speak to a parent/carer who may then contact the school



We encourage our school community to 'Talk to Us' about any worries or concerns they may have about themselves or others. This enables us to address issues and identify the most appropriate support for children and/or their families. Our infographic below details key staff who are equipped to provide support to pupils in relation to any difficulties they may be experiencing.

WE ARE A TELLING SCHOOL TALK TO US

talktous@wansteadhigh.co.uk



Miss Hillman
Headteacher



Mrs Martin
Deputy Headteacher / Deputy
Designated Safeguarding Lead



Ms Cini
Director of Inclusion /
Designated Safeguarding Lead



Mr Wood
Assistant Headteacher



Mrs Bray
Assistant Headteacher /
Head of 6th Form



Miss White
Head of Year 7



Mr Tann
Head of Year 8



Ms Murray
Head of Year 9



Mr Tinker
Head of Year 10



Miss Gullefer
Head of Year 11



Mrs Van Beers
Head of Year 12



Mr Hamza
Head of Year 13



Mrs Ahmed
Pastoral Support Manager
Year 7



Ms Seekings
Pastoral Support Manager
Year 8 & 9



Ms Khan
Pastoral Support Manager
Year 10 & 11



Ms Vashisht
School Counsellor



Miss Choudhry
Learning Mentor



Mrs Kaur
Learning Mentor /
Wellbeing Supervisor

15. Supporting Peers

We understand that, when a pupil is suffering from mental health issues, it can be a difficult time for their peers. In response to this, we will consider, on a case-by-case basis, any peers that may need additional support.

We regularly revisit how peers can help, how peers can access support themselves, and healthy ways of coping with any emotion a pupil might be feeling.

Pupils who may not require long term support, but have been affected by a peer who is suffering from mental health issues, can access triage sessions with one of the schools Learning Mentors.

16. Useful Contacts and Links

Emotional Well Being and Mental Health Service (EWMHS) <i>formerly CAMHS</i>	0300 555 1182
Waltham Forest CAMHS	0300 555 1247

YOUNGmINDS

- **Young Minds** provide extensive information and support online at www.youngminds.org.uk.
- Provides free, 24/7 crisis support across the UK if you are experiencing a mental health crisis.
- If you need urgent help text YM to 85258.
- All texts are answered by trained volunteers, with support from experienced clinical supervisors.
- Texts are free from EE, O2, Vodafone, 3, Virgin Mobile, BT Mobile, GiffGaff, Tesco Mobile and Telecom Plus.
- Free **Parent helpline** 0808 802 5544 free Mon-Fri from 9.30am to 4pm.



- **Papyrus** offers confidential advice and support for young people struggling with suicidal thoughts, as well as family and friends; and information about how to make a safety plan on their website www.papyrus-uk.org.
- Its helpline service - HOPELINE247 - is available to anybody under the age of 35 experiencing suicidal thoughts, or anybody concerned that a young person could be thinking of suicide.
- Opening times 24/7 every day of the year.
- Telephone [0800 068 4141](tel:08000684141).
- Text [88247](tel:88247).
- Email pat@papyrus-uk.org.

kooth

- **Kooth** is an online counselling service offering support for children aged 10 - 18 years of age
- Support can be accessed online at www.kooth.com
- Monday - Friday 12pm - 10pm and Saturday - Sunday 6pm – 10pm

THE MIX

- **The Mix** offer support for a variety of topics including mental health and relationships.
- Extensive resources and support online at www.themix.org.uk
- Under 25s can talk to The Mix for free on the phone, by email or on their webchat. You can also use their phone counselling service, or get more information on support services you might need.
- Freephone: 0808 808 4994 (13:00-23:00 daily)



- **Childline** offer a telephone service which is free on any phone and won't show on the bill.
- There is also the option to send an email for support or speak to a counsellor online via the website www.childline.org.uk.
- Childline's website also offers lots of advice and a message board where children can share their experiences with other young people.
- The **Report Remove** tool helps young people under 18 in the UK to confidentially report sexual images and videos of themselves and remove them from the internet. www.childline.org.uk/info-advice/bullying-abuse-safety/online-mobile-safety/report-remove/.

grief encounter

- **Grief Encounter** work closely with schools nationwide to ensure all students have someone to turn to following bereavement.
- Through their grieftalk helpline, 1:1 and group support services, we aim to enhance society's care of bereaved children.
- Telephone 0808 802 0111 Mon-Fri 9.30am-3pm
- Email bereavementsupport@griefencounter.org.uk
- A wide range of resources on their website www.griefencounter.org.uk



- **Child Bereavement UK** offer support for young people and their families who have experienced a bereavement online at www.childbereavementuk.org.
- Live chat via website (Monday - Friday, 9am - 5pm).
- National Helpline 0800 02 888 40 (Freephone. Monday – Friday, 9am – 5pm).
- Email for bereavement support: support@childbereavementuk.org.

WINSTON'S WISH WW

- **Winston's Wish** provide support and therapeutic advice on supporting a grieving child or young person after the death of a loved one online at www.winstonswish.org
- Freephone National Helpline on 08088 020 021
- UK-wide national email service, offering support, information and advice to anyone seeking it via ask@winstonswish.org.
- Winston's Wish Crisis Messenger: text WW to 85258

every mind matters

- **Every Mind Matters** is an NHS service provide support for mental health and wellbeing
- www.nhs.uk/oneyou/every-mind-matters
- Every Mind Matters gives you simple and practical advice to get a healthier mind and get more out of life - from how to deal with stress and anxiety, to boosting our mood or sleeping better. It will help you spot the signs of common mental health conditions, get personalised practical self-care tips and information on further support.



- **Mind's** 4 helplines and website www.mind.org.uk provide a voice at the end of the phone when there's nowhere else to turn. Each line meets a different mental health or wellbeing need – from information and service finding to understanding mental health law.
- **Support line: 0300 102 1234** - open 9am to 6pm, Monday to Friday (except bank holidays). Mind's support line is a safe space for you to talk about your mental health. Mind's advisors are trained to listen to you and help you find specialist support if you need it.
- **Infoline: 0300 123 3393** - open 9am to 6pm, Monday to Friday (except for bank holidays). Ask about: Mental health problems, Where to get help near you, Treatment options, Advocacy services, Welfare benefits (ask to speak to a welfare adviser).
- **Welfare benefits line: 0300 222 5782** - open 9am to 5pm, Monday to Friday (except bank holidays). Mind's welfare benefits line supports anyone with mental health problems who is navigating the benefits and welfare system.
- **Legal line: 0300 466 6463** - open 9am to 6pm, Monday to Friday (except for bank holidays). Mind's Legal line offers legal information and general advice on mental health related law in England and Wales.

Appendix 1: What Makes a Good CAMHS/EWMHS Referral?

General considerations:

Have you met with the parent(s)/carer(s) and the referred child/children?

Has the referral to CAMHS/EWMHS been discussed with the parent(s)/carer(s) and the referred child/children?

Has consent been gained for the referral? If the Child or Young Person is over 14, has consent been gained directly from the Young Person? Does the Family/Young Person want support? - ***We cannot process referrals without consent/ willingness to engage. If the family are unwilling to consent, but you feel concerns remain which place the Child or Young Person at risk, consider a social care referral***

Basic information:

Name and date of birth of referred child/children

Address and telephone number - ***WE CANNOT PROCESS A REFERRAL WITHOUT A CONTACT NUMBER FOR THE FAMILY***

Who has parental responsibility?

Surnames if different to child's

GP details

Reason for referral:

What is the specific Emotional Wellbeing / Psychological or Mental Health difficulties that you want CAMHS/EWMHS to address?

How long has this been a problem and why is the family seeking help now?

Is the problem situation-specific to one situation or context, or more generalised?

What is your understanding of the problem/issues involved?

What is the child/young person's and parent/carers view of the referral?

What are your anticipated outcomes following our involvement? What would you expect to change?

What is the child/young person's and parent/carers anticipated outcomes?

What **risks** are there to the young person, their family or others if the Mental Health or Emotional Need is not addressed?

Further helpful information:

Who else is living at home and details of separated parents if appropriate?

Name of school.

Who else has been or is professionally involved and in what capacity?

Has there been any previous contact with our service?

Has there been any previous contact with social services?

Details of any known **protective factors**.

Details of known **Risk Factors** which may impact on their Mental Health and Wellbeing – such as, Care Status, Risk of Exploitation, Criminal Activity, Substance Use, Familial Substance Use, Domestic Violence etc.

Any relevant history ie. family, life events, Familial Mental Health Difficulties, and/or developmental factors.

Please see below for guidelines of which referrals are likely to be referred on to Specialist CAMHS Pathways:

Anxiety:

- Where it is affecting the child's development or ability to function in daily tasks
- Where it is out of proportion to the family circumstances (anxiety is normal in response to difficult events, this does not necessarily mean the child or YP needs specialist Mental Health input).
- Where there is a significant impact on the parent/carer/child relationship
- Where there is a sudden change or deterioration

Bereavement Response:

- Children with 'normal' grief responses are able to access more appropriate support by other agencies - e.g., Winston's Wish, Grief Encounter and school nursing services. Only when the grief response results in complex trauma, would this be passed on to specialist CAMHS.

Complex behavioural problems:

Children and young people who have complex behavioural problems at home that have failed to respond to significant advice and support from others eg. schools and social care teams.

We would not work with:

1. Children and young people whose problems are primarily school-based and who have not received input from EDUCATIONAL SUPPORT SERVICES.
2. Children and young people where the behaviour, although challenging is age appropriate.
3. Behaviour problems primarily home based, who have not had input from other services, such as parenting support or Early Intervention.

Depression:

Where there is evidence of moderate to severe depression:

- Where the difficulties are beyond age-appropriate mood variation, and
- Where there is an impact on daily living – e.g., sleeping, eating, etc. or suicidal ideas or plans

Eating Disorders – Information regarding child or young person's height and weight must be provided.

Obsessional Compulsive Disorder:

- **Obsessions** which are intrusive repetitive thoughts and **Compulsions** which are repetitive, ritualistic, unwanted actions. These will be either distressing or disabling and interfere with the child's functioning

Psychosis (Hearing Voices):

- When there are symptoms which manifest as delusions, hallucinations or significant withdrawal from daily functioning. Please note, many people hear voices and this alone is not indicative of a Mental Health issue.

School Refusal:

- If the child experiences severe emotional upset on being faced with the prospect of attending school. This may be demonstrated by excessive fearfulness, anxiety, temper, misery and complaints of feeling unwell without any obvious physical cause. A **multi-agency** approach is the most useful approach to take in these cases

Self-harm:

- Where there is concern about self-harm in the context of other difficulties.
 - Overdoses and other serious self-harm cases should be sent directly to A&E in the first instance.
- It is important that **all agencies** realise that they have a role to play in the management of self-harm.

**** CHILD PROTECTION/SAFEGUARDING CHILDREN - If you are concerned that a child is at risk of harm from physical, sexual, emotional abuse or neglect you must refer to Social Care in the first instance, specifying your concerns.**

Appendix 2: The Boxall Profile Online Profile and Assessment Tool

At Wanstead High School we use a renowned assessment and planning tool called the Boxall Profile Online to inform each stage of this graduated response.

The Boxall Assessment and Plan

The Boxall Profile Online is a digital version of the Boxall Profile assessment, first developed by educational psychologist Marjorie Boxall and Marion Bennathan. It is used in schools by educational professionals across the UK, and was highlighted in the Department of Education's 2018 Mental Health and Behaviour in Schools advice.

The tool was created because teachers needed a better way to understand how students are doing and what might be a barrier to learning within the classroom and wider school environment.

How does the Boxall Profile Tool work?

The online tool is split into two sections and the teacher (or person who knows the child best) completes a series of questions for each section.

Section 1: The Developmental Strands

Think of the Developmental Strands as building blocks. This section of the assessment explores different areas of a child's development. It helps teachers to identify a child's strengths and highlight areas that require additional support.

Section 2: The Diagnostic Profile

The Diagnostic Profile contains questions that help teachers spot any challenges or barriers that might hinder your child achieving at school. These challenges could be things like trouble with friends, difficulty learning, or other obstacles that might be connected to their early learning experiences. By understanding and addressing these challenges early on, teachers gain a greater understanding and needs of the children in their care and can ensure the learning opportunities impact all children across the class. Please note this tool does not diagnose any specific conditions.

Once the teacher has answered the questions they are presented with scores for each area and a report, which will highlight any areas of support that the child may need. They can then access resources, strategies and create a learning plan to support the child or young person.

How does it help? The Boxall Profile® Online helps teachers with:

- Observing and Understanding Your Child's Behaviour. These observations help them to identify if they might need extra help or support.
- Setting Goals and Helping Your Child Improve
- Teachers work with your child to set goals and targets – to help them improve at things. These goals are tailored just for them, and they help them learn new skills.
- It allows a greater depth of understanding of your child's progress, which is not always visible through learning in a classroom.

What does it mean if my child is being assessed using the Boxall Profile® Online?

If you're a parent or carer and your child's teachers or other professionals are using the Boxall Profile® Online, it's a positive sign. It means they care about your child's progress and want to provide the best support. If the assessment highlights an area of need, they make sure your child gets the help they need in a way that suits them best.



A well-being plan for _____

My warning signs/triggers that I can identify early

Things that have helped before that might work now

Warning signs which may be visible to staff





What staff can do to support me

My trusted adults

New strategies I can try

Thoughts
<i>I've got through this before, I can do it again</i>
<i>I can feel bad but choose to take a new, safe direction</i>
<i>I am stronger than I think</i>
<i>Right now, I am not in danger, right now I am safe</i>
<i>This is difficult and uncomfortable, but only temporary</i>

Activities
Grounding 5-4-3-2-1
Box Breathing
Listen to music that makes you feel calm
Drawing, painting, colouring
Counting things around you

Useful contacts
 www.youngminds.org.uk Text YM to 85258
 www.kooth.com
 www.papyrus-uk.org 0800 068 4141_Text 88247
 www.themix.org.uk 0808 808 4994

<input type="checkbox"/> Day One	<input type="checkbox"/> Day Two	<input type="checkbox"/> Day Three	<input type="checkbox"/> Day Four
Pick one to do each day: <input type="checkbox"/> Meditate <input type="checkbox"/> Yoga <input type="checkbox"/> Go outside <input type="checkbox"/> Journal	Make a to-do list (add the little things!) See how much you get done in a day!	Research a new DBT/CBT/ACT coping skill.	Intentionally make the time to pamper yourself. Schedule it and stick to it.
<input type="checkbox"/> Day Five	<input type="checkbox"/> Day Six	<input type="checkbox"/> Day Seven	<input type="checkbox"/> Day Eight
Put some extra love and time into your relationships.	Choose an affirmation to repeat throughout the day.	Plan a date night for yourself that's all about self-care.	Focus on your morning and evening self-care routines.
<input type="checkbox"/> Day Nine	<input type="checkbox"/> Day Ten	<input type="checkbox"/> Day Eleven	<input type="checkbox"/> Day Twelve
Clean up your online spaces. Unfollow, block, or unsubscribe.	Have a rest day. Rest in physically but also mentally.	Make a list of all the things you're grateful for.	Write down what you most enjoyed or what was helpful to you!