

Whole school approach to improving mental health and wellbeing

An outstanding whole school approach to mental health and emotional wellbeing in Hertfordshire would take account of:

1. Leadership and Management

- 1.1 Named SLT lead for mental health with appropriate capacity and resource
- 1.2 Mental Health Lead's details held on a database to receive regular updates including 'Leading mental health in Hertfordshire schools' termly newsletter (email schoolMHtraining@hertfordshire.gov.uk to be put on the database)
- 1.3 Mental health lead is competent to signpost, lead assessments and make referrals where needed (one day training to support this role is available, various tools to support this role are available on the Healthy young minds in Herts mental health lead toolkit including referral forms)
- 1.4 Mental Health Leads can attend pastoral lead networks to share good practice and find solutions to local challenges
- 1.5 Named Governor for mental health and wellbeing
- 1.6 Provision reviewed and improved via school development plan
- 1.7 Wellbeing policy / strategy developed and owned by whole school community
- 1.8 SLT buy in to wellbeing being one of the key factors in academic and personal success

2. Ethos and environment

- 2.1 Quiet areas for pupils to regulate their emotions
- 2.2 Pupils report feeling safe at school
- 2.3 Vision, values and high expectations clearly and consistently communicated
- 2.4 Recognise and challenge stigma around mental ill health, visual reinforcement of positive values (displays, focus weeks etc)
- 2.5 Students are helped to map out a sense of future: aspirations, hope and purpose meaningful to each individual
- 2.6 Efforts and achievements of staff and students regularly celebrated
- 2.7 Information for pupils, staff and parents is accessible via the website, leaflets etc
- 2.8 Pupils and staff do not attempt to hide elements of their identity (eg sexuality, financial background etc)
- 2.9 Promotion of British values, Prevent, SMSC, Citizenship across all aspects of provision
- 2.10 Promotion of equality, diversity and challenging discrimination
- 2.11 Strong anti-bullying programme
- 2.12 Opportunities to develop roles and responsibility
- 2.13 The commitment to mental health & wellbeing is communicated to the whole school community
- 2.14 Pupils know who to talk to in and out of school when they need to

3. Curriculum

- 3.1 Weekly PSHE lessons taught by a teacher
- 3.2 Teach pupils how to stay well, normal brain function, when, where and how to seek help
- 3.3 Teach pupils strategies including how to regulate and self soothe
- 3.4 Teach how the brain works, impact on emotions, thoughts & behaviour
- 3.5 Teach about holistic wellbeing (healthy eating, exercise, sleep hygiene, eg 5 ways to wellbeing) through a range of subjects, enrichment activities, sport, tutor time etc.
- 3.6 Teach about healthy, respectful relationships, making choices
- 3.7 Teach online safety and boundaries, filtering, social norms, following the 'crowd'
- 3.8 Utilise programmes and approaches such as Growth Mindsets, Philosophy for Children, mindfulness, resilience, Protective Behaviours, SEAL, Circle Time, My Teen Brain etc
- 3.9 At KS4, pupils may desire lessons about specific mental illnesses in addition to learning about staying well so they can feel more informed. The PSHE association have published guidance to support schools to consider how best to manage this carefully

4. Teaching, Learning and Resilience

- 4.1 Develop critical thinking, questioning, problem solving, risk taking, persistence, goal setting, emotional literacy
- 4.2 Break overwhelming tasks or questions into manageable chunks
- 4.3 Let pupils make mistakes and learn from failure, talk about common mistakes, model learning from mistakes, see failure as a critical learning friend (explore neurobiology of learning)
- 4.4 Teach concrete (practical) social skills EG how to start a conversation as opposed to being less shy
- 4.5 Challenge catastrophic language and help to contextualise perceptions
- 4.6 Identify and develop personal strengths (caring, calm, honest, etc)

5. Connections and connectedness

- 5.1 Supportive networks and relationships that enable pupils to develop social relationships
- 5.2 Social skills are taught and modelled
- 5.3 Listening & empathy are valued, taught & practised; time made to listen
- 5.4 Peer support is available (drop ins, mentoring, lunch clubs etc)
- 5.5 Pupils are given permission to talk & know the process for seeking help eg worry box, & who they can approach (not only staff with specific training)
- 5.6 Kindness and respect is encouraged and underpins expectations around relationships
- 5.7 At least one trusted adult to hold in mind, make regular connections with
- 5.8 Opportunities for volunteering, raising money for charity, supporting others
- 5.9 Connectedness to the environment; Forest schools, eco-council, gardening, etc
- 5.10 All pupils receive unconditional positive regard
- 5.11 Pupils report a sense of belonging within the school community

6. Student voice

- 6.1 An effective and valued school council is in place
- 6.2 Pupils participate in what and how they are taught, there is authentic involvement in learning
- 6.3 Feedback from the whole school community is sought, feedback influences change
- 6.4 Some schools may have Youth Health Champions
- 6.5 Opportunities for anonymous feedback are provided
- 6.6 Lessons and activities on mental health and wellbeing are evaluated for impact and effectiveness

7. Staff development

- 7.1 Promoting wellbeing is the responsibility of all staff
- 7.2 Teaching staff should know about the link between mental health and learning
- 7.3 All staff should be aware of signs, symptoms, how to intervene early, have the confidence to act, offer on-going support and refer on when needed
- 7.4 All staff should be aware of the challenges for young people (at home, school and in the community)
- 7.5 Staff should be aware of risk and resilience factors and how these interplay
- 7.6 Staff wellbeing is promoted, staff stress is acknowledged and supported
- 7.7 Staff should know about confidentiality and safeguarding
- 7.8 Staff should be introduced to and encouraged to access MindEd & create a CPD profile
- 7.9 Staff are challenged when reasonable adjustments / pastoral recommendations are not followed adequately
- 7.10 Staff stay up to date and informed on research, changing issues for pupils
- 7.11 There is a commitment to, a regularly scheduled time and an appropriate model of solution focused reflection given to discuss pupils' needs and how to meet them
- 7.12 The school is committed to the Herts Steps approach to responding to behaviour

8. Identifying need

- 8.1 The needs of pupils with a learning difficulty, those looked after, with physical health problems, young carers, LGBT etc are considered
- 8.2 Interests are identified and access to extra curricular activities are facilitated
- 8.3 When to worry tool can be used to ensure all staff know what kind of concerns to be alert to
- 8.4 All staff concern form can be used to pass concerns on to mental health lead
- 8.5 Pupils not meeting milestones in personal development are identified
- 8.6 A regular opportunity to identify and review individual development targets alongside academic progress is embedded
- 8.7 Outcome measure tools such as the Strengths and Difficulties Questionnaire (SDQ) are used to identify and assess needs
- 8.8 Awareness of pupils' and parents' needs ahead of transition points and exams exists

9. Monitoring impact

- 9.1 Case studies capture the journey of pupil's outcomes from accessing support
- 9.2 Outcome measures and feedback tools are used to measure impact between the start and finish of interventions
- 9.3 Record of concern form can be used to record and monitor the needs of pupils with mental health difficulties
- 9.4 Attendance, lateness and attainment data can support monitoring of impact, especially when triangulated with other data
- 9.5 Recording complexity factors (EG being a young carer, LGBT, CLA, having a SEN, a physical health issue) can enable further interrogation of what works for different vulnerabilities
- 9.6 Schools should feel empowered to stop interventions that aren't having an impact and explore other options
- 9.7 Pupils with medical / emotional and mental health needs are recorded and monitored under the SEND code of practice

10. Working with Parents and Carers

- 10.1 Effective, inclusive & non-judgemental partnerships with parents are fostered
- 10.2 Drop ins are provided
- 10.3 Information about support for adult mental health and wellbeing problems is available
- 10.4 Information sessions to help parents learn key messages about the needs and difficulties of young people are regularly hosted by the school (In partnership with external agencies where appropriate)
- 10.5 Parent support programmes are made available via the school

11. Targeted support (school based and external)

- 11.1 Specific help for vulnerable pupils is available
- 11.2 A process for accessing school based provision is in place and understood
- 11.3 Access to counselling and other therapeutic provision is available via the school (EG play therapy, art therapy)
- 11.4 121 and group provision may be provided by suitably trained staff within the school (EG Protective Behaviours, Theraplay, Drawing and Talking, Time to Talk, Nurture Group) who have access to reflective space or supervision
- 11.5 Quality assuring external providers is the role of the school (guidance on procuring counselling provision / training and workshops can be found in the mental health leads online toolkit)
- 11.6 School is prepared to help with basics like food, transport, clothing, housing
- 11.7 Some vulnerable pupils require a low level intervention such as a daily check in; each pupil is treated as an individual and collaborates on what might help them
- 11.8 The school has a procedure for supporting pupils in emergencies or at crisis

To apply for Healthy Young Minds in Herts School Accreditation and for the full self-review checklist and action plan, visit www.healthyyoungmindsinherts.org.uk

