COGNITA

AKELEY WOOD SCHOOL

Wellbeing

and

Mental Health

Policy

November 2020

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1. Important contacts and Arrangements

SCHOOL CONTACTS	NAME	CONTACT DETAILS EMAIL AND/OR MOBILE)
Wellbeing Lead		Rebecca Chapman rebecca.chapman@akeleywoodschool.co.uk 01280 828111
Designated Safeguarding Lead (DSL)		Rebecca Chapman rebecca.chapman@akeleywoodschool.co.uk 01280 828111
Deputy DSL (DDSL)		Lotty Dee-Andrew Faye Howkins Harriet Featherstone Tom Gray Andy Brown
Principal		Simon Antwis Simon.antwis@akeleywoodschool.co.uk
Director of Education		Nicola Lambros Nicola.lambros@cognita.com
Group Director of Education	Simon Camby	simon.camby@cognita.com

SCHOOL CONTACTS	NAME	CONTACT DETAILS EMAIL AND/OR MOBILE)
Regional Safeguarding Lead (RSL) - Europe	Alison Barnett	alison.barnett@cognita.com
Director of Wellbeing	Beth Kerr	beth.kerr@cognita.com

Details of important internal contacts are listed above.

With regards to arrangements, the DSL/Wellbeing Lead, wherever their location (remote or onsite), will be responsible for supporting the emotional wellbeing and mental health of pupils, alongside the Principal who holds ultimate responsibility.

The DSL/ Wellbeing Lead and DDSL's, with the support of all school staff, will identify who the most vulnerable children in our school are with regards to mental health, and arrange additional support/interventions as needed. They will update any safeguarding records and liaise with parents at all time, and make referrals to external partner agencies where significant mental health concerns arise.

2. Definitions

Mental Health is defined as a 'state of wellbeing in which every individual recognises his or her potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her own community' (World Health Organisation).

Wellbeing is defined as the sense of feeling content: socially, emotionally, and physically flourishing.

3. Core principles

The safety and wellbeing of all our pupils is the number one priority in our school

In our school we follow these important safeguarding and wellbeing principles:

- The best interests of children **must** come first

- If anyone has a concern about any child, including in relation to their emotional wellbeing /mental health they should act on it immediately by informing their DSL and Wellbeing Lead
- A DSL or DDSL must be available and contactable during school hours in term time
- Children's wellbeing should be promoted when they are learning **online** in school or at home
- We will have regard to the statutory safeguarding guidance: Keeping Children safe in Education (2020).

4. Rationale

- Wellbeing is a global issue linked to the increasing prevalence of mental health concerns (Mental Health Foundation)
- One in eight children aged 5-19 have at least one mental health disorder (Mental Health Foundation)
- Suicide is the second leading cause of mortality in 15-19-year olds (Mental Health Foundation)
- More than 80% of the world's adolescent population is insufficiently active (World Health Organisation)

Evidence supports that a proactive focus on wellbeing impacts positively on personal development and academic success, with the aim of equipping all young people to understand and self-regulate their own wellbeing (Organisation for Economic Co-operation and Development l International Positive Psychology Association)

At Akeley Wood School, we are committed to '**Providing an inspiring world of education: building self-belief and empowering individuals to succeed**'. This means that we want each student to flourish, aspire, fulfil their dreams and, most importantly, be comfortable with who they are. Ensuring that our pupils develop as well-rounded individuals takes **intentional effort** and does not happen by chance. For this reason, we place a high emphasis on creating the right climate within each school and proactively teaching pupils about wellbeing.

We believe that **academic outcomes and pastoral care are interrelated and complementary**. We wish for our pupils to be healthy and well-rounded individuals, able to inter-relate with others; to make sound life choices; to engage and make a positive difference; and be prepared for whatever they wish for in their future. Within Akeley Wood School, we see health in its broadest sense - including **physical and mental health**, with these being inter-related. Our over-riding approach to mental health and wellbeing is positive and proactive.

5. A whole school approach

It is critical to have a whole school approach to mental health and wellbeing. This means that we:

- have a culture and environment that promotes positive mental health and wellbeing
- raise awareness of emotional wellbeing and mental health issues, and reduce stigma
- ensure that all school staff know every child and young person in the round, including their mental health
- upskill staff so they can respond to children and young people's mental health needs should they arise
- identify the mental health needs within the school
- implement both targeted and school-wide interventions to help pupils build resilience and support their wellbeing
- make sure that pupils and their parents/carers are aware of, and able to access a range of mental health interventions
- are committed to student and parent participation in decision making
- support staff to have positive wellbeing themselves
- deliver high quality teaching to pupils around mental health and wellbeing
- align and link wellbeing strategies to existing policies and procedures

6. Our Be Well Charter

Our Be Well Charter (below) is a simple model of wellbeing which is designed to help everyone reflect on their own wellbeing and understand how to maintain it or, if necessary, improve it. It takes account of both physical and mental health and is embedded throughout our school.

7. The link between Mental Health and Safeguarding

There is a logical link between safeguarding and mental health. With regards to safeguarding, it is incumbent upon us all to ensure that we:

- Protect children from maltreatment
- Preventing impairment of children's mental and physical health or development
- Ensure that children grow up in circumstances consistent with the provision of safe and effective care
- Take action to enable all children to have the best outcomes

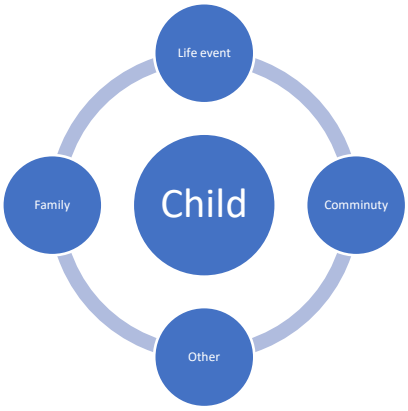
Whilst only appropriately and medically trained professionals should attempt to make a diagnosis of a mental health problem, all staff are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. If staff have a mental health concern about a child, they will speak to the Designated Safeguarding Lead (DSL) and Wellbeing Lead. Should there also be safeguarding concerns about the child, then appropriate decisions will be made to safeguard the child by the DSL. Likewise, if there are safeguarding concerns about any child, consideration about how this may be impacting on the child's emotional wellbeing will be taken into consideration, support offered, and interventions put in place where appropriate.

Internal school *Safeguarding* Meetings will still take place at a minimum of 6 weeks and pupils, where there is a new concern about deteriorating wellbeing or mental health for a child, this will be discussed. Clear actions for intervention will be decided, working in partnership with the parents/external agencies if involved.These interventions will be reviewed at every subsequent meeting, or before as the need arises, as is often the case with children who are experiencing poor or deteriorating mental health.

8. Identifying vulnerable children

We recognise that we have a pivotal role to play in building children and young people's resilience, fostering their emotional wellbeing, and supporting them to have good mental health. We know that all children and young people need to have opportunities to talk to school staff about how they are feeling and what maybe troubling them. Our staff understand that the 'contextual safeguarding model' and knowing about the 'bigger picture' of children and young people's lives *including their family circumstances*, will help them identify any social, emotional and mental health needs.

All staff employed in Akeley Wood School have an awareness of the early indicators of poor emotional wellbeing, and know that certain children, young people and families are more likely to be at risk of having poor emotional wellbeing. The risks can relate to their community, to life events, to their family, to the child themselves and/or another factor.



The tables below show the key protective factors alongside the risk factors with regards to developing mental health difficulties. The school DSL and Wellbeing Lead will regularly review children who may face these risks to ensure that any children who are more vulnerable are identified at any early stage with the aim of preventing a mental health difficulty arising in the first place, or reducing the impact of one before it becomes more serious.

In the Child

Protective Factors	Risk Factors
Being female (in younger children)	Genetic influences
Secure attachment experience	Low IQ and learning difficulties
Outgoing temperament	Specific developmental delay or neurodiversity
Sociability	Communication difficulties
Being a planner and having a belief in control	Physical illness
Humour	Academic failure (perceived or actual)
Problem solving skills	Low self-esteem
Experiences of success and achievement	
Faith or spirituality	
Capacity to reflect	

In the family

Protective Factors	Risk Factors
At least one good parent-child relationship	Overt parental conflict
Affection	Family breakdown
Clear, consistent parenting/discipline	Inconsistent or unclear parenting/discipline
Support for education	Hostile or rejecting relationships
Supportive long-term relationship or the absence of severe discord	Failure to adapt to a child's changing needs
	Abuse
	Parental mental health illness
	Parental criminality, alcoholism or drug misuse
	Death and loss-including loss of friendship

In the School

Protective Factors	Risk Factors
Clear policies on behaviour and bullying	Bullying
Open door policy for children to raise problems	Discrimination
A whole school approach to promoting good mental health	Breakdown in or lack of positive friendships
Positive classroom management	Deviant peer influences
Positive peer influences	Peer pressure

In the community

Protective Factors	Risk Factors
Wider supportive network	Socio-economic disadvantage
Good housing	Homelessness
High standard of living	Disaster, accidents, war or other overwhelming events
High morale school with positive policies for behaviour, attitudes and anti-bullying	Discrimination
Opportunities for valued social roles	Other significant life events
Range of sport/leisure activities	

9. Interventions to promote positive wellbeing

We know that school interventions to promote positive emotional wellbeing are more successful when pupils and their parents participate in any decision making. Any interventions put in place by school staff to support pupils with their emotional wellbeing are therefore planned, co-ordinated, targeted appropriately, then sustained and evaluated. With regards to the support offered to pupils, please see below:

Universal support

We will support the emotional wellbeing of **all** pupils in partnership with their parents/carers, who hold main responsibility for meeting their child needs.

Universal Support
Well-being Hub – The Space, quiet room for children to take time out, reflect and recharge, access support literature and information.
AS Tracking – Affective Social Tracking assessment undertaken twice per academic year to identify hidden pupil voice.
Global Be Well Day – Annually in September the whole school takes part in activities to support aspects of the Cognita Be Well charter.
Access to pastoral support through personal tutor and designated Head of Year.
Signposted to external agency support – 'Green Book'

Pastoral Support

Some children, in addition to the above, may require enhanced levels of *pastoral* support in the form of informal daily or weekly check-ins with nominated staff.

Pastoral Support
Head of Year (during Covid are based in designated rooms in student bubbles). Their availability is posted on the door and students can drop in if required.
Pastoral support is available from Non-teaching DDSL in the Safeguarding office in AWH Monday, Wednesday Thursday and Friday. Students can access this support each day without prior arrangement. At THM DDSL pastoral support is available each day in The Space/Library. Sixth Form Supervisor non-teaching based in sixth form centre.
Parents or students can contact tutors, teachers or pastoral staff using their school email address. Forename.surname@akeleywoodschool.co.uk (additional details listed in the student Green Book) to discuss concerns and arrange a 'check in' at break or lunchtime.

Targeted support

For some children, enhanced pastoral support may not be enough to meet their emotional/mental health need. They will be given additional targeted support with nominated staff.

Targeted Support
Pastoral support groups – students will be invited to undertake additional interventions for example: Social Stories, Nurture Group, Friendship focus group, Anxiety Group, knitting for relaxation.
Student Mentor– Sixth Form Mentoring with Well Being Ambassador. (during Covid the student mentoring programme has been suspended)
Teacher Mentor – Specific teacher mentor, after triage by pastoral team HOY a teacher mentor may be arranged to support a specific pupil.
School Counsellor – students will be referred to Barbara Foster our school counsellor if the situation has: a) happened suddenly and counselling is deemed appropriate b) initial intervention stages have been implemented but the situation is not improving or requires further intervention.

External Support

For some children, enhanced pastoral support and targeted support may not be enough to meet their need. In these situations, the parents of the child will be signposted to an external agency/organization/professional/GP. The school may also make a referral to an external agency as required.

Request to temporarily withdraw

In some situations, akin to when a child is physically very unwell, the mental health needs of a pupil may be so serious that the school is unable to keep them safe on the school site despite a range of interventions being attempted. Discussions about how interventions are managed are facilitated with the parents at every step of their child's journey. Any decision made about the pupil being unable to attend school may be a temporary measure until the child's mental health is assessed as stable enough for them to safely return to school (this may be an immediate full return or a staggered return by arrangement). This assessment will be required to be completed by the child's treating clinician and must be put in writing for the school prior to the child reintegrating.

Request to permanently withdraw

In a very small minority of situations, despite a range of interventions attempted, a pupil's mental health needs are such that the school can no longer keep them safe on the school site. A decision will be made that the school is no longer not the most appropriate setting to meet the child's mental health needs and the parents will be asked to permanently withdraw their child. All avenues and options will be considered before this serious step is taken.

Self-harming and/or suicidal ideation interventions

Should an incident occur where a pupil has harmed themselves, first aid will be administered by the school's nominated First Aider and their parents contacted unless to do so will place the pupil potentially at greater risk of harm (in these situations, social care and the Regional Safeguarding Lead will be contacted for advice).

Should a more serious incident occur whereupon a pupil requires urgent medical assistance after harming themselves, an ambulance will be called via 999, and the parents contacted.

Should a pupil voice that they intend to harm themselves or that wish to take their own life, they will be supervised by the school staff immediately. The parents will be called and asked to collect their child immediately form school. They will be advised to take their child to Accident and Emergency to have an urgent mental health assessment.

Where pupils have serious mental health needs, including self-harm or suicidal ideation, then a Risk Assessment will be completed by the school, in collaboration with the pupil and their parents. Those who have expressed significant and repeated suicidal ideation or attempted to take their own life will require medical certification to say that their mental health is stable enough for them to return safely to school (see above).

10. Wellbeing in the Curriculum

Life Learning Curriculum Overview – Mental Health and Well-Being

Year 7	Bullying	Anti-Bullying with class discussion.
	Being Safe Online	How can we manage the pressure to conform?
		Recognising bullying in all it's forms and how the media portray young people
	Mental Health - moving up	Transition to secondary school, how to cope with change and new challenges
	Healthy Body and Mind	How physical exercise can help maintain and healthy mind.
	Healthy Body and Mind	Characteristics of mental and emotional health
Year 8	Addictive Behaviours	Gambling in all it's forms and financial decision making.

	Attitudes to mental health	
	Promoting emotional well-being	
	Digital resilience	
	Coping strategies	
Year 9	Mental Health	What challenges might young people face? What is positive mental health?
	Mental Health	How can we change negative thinking into a positive attitude? How can we support each other?
	Eating Disorders	What are unhealthy coping strategies? What makes a healthy diet?
	Eating Disorders	What messages do the media and advertising give about healthy eating? What are types of eating disorders?
	Families	What is common conflict between teenagers and parents and how can we manage conflict at home?
	Addictive Behaviours	What is addiction? Why would someone become addicted? What is the effect on friends and family? What support is available?
	Bullying	What do we mean by LGBTQ+? What is homophobia, transphobia and biphobia? How can we support each other?
Year 10	Mental Health	What do we understand by the term 'wellbeing'? How can we maintain a positive wellbeing?
	Mental Health	What kind of conditions are associated with mental health?
	Mental Health	How is mental health portrayed in the media?
	LGBTQ+	What are human rights? What is LGBTQ+?
	LGBTQ+	What can we do to support LGBTQ+ communities?
	Bereavement	How can we cope with grief? How can we support someone grieving?
	Body Image	What is positive body image?
	Body Image	How does the media portray body image?
	Body Image	How can we promote positive body image?
	Self Esteem/Confidence	What do we understand by self-confidence? How can we translate this to workplace?
Year 11	Healthy Lifestyles	What are the links between healthy lifestyle choices and the risks associated with certain illnesses?
	Harmful Substances	How can someone give up harmful substances and the support that is available?
	Health and Responsibility	Why is it important to take personal responsibility for health?
	Cosmetic Changes	What are the health risks of various cosmetic changes and why would people choose to make permanent changes to their body?
	Stress	How can we reduce stress during a pressured situation?
	Confidence and Feedback	How can someone recognise stress in themselves and others? Why is feedback important?
Year 12	Returning After COVID-19	Infection, Social Distancing, Lockdown Experiences

	Returning After COVID-19	Staying safe at school, COVID-19 related anxiety.
	Relaxation & Stress Management	Evaluating relaxation methods, avoiding stimulants such as caffeine and screens
	Positivity & Happiness	Summary of learning.
	Depression	Removing the stigma of depression and mental illness. Seeking help.
Year 13	Returning After COVID-19	Infection, Social Distancing, Lockdown Experiences
	Returning After COVID-19	Staying safe at school, COVID-19 related anxiety.
	Relaxation & Stress Management	Evaluating relaxation methods, avoiding stimulants such as caffeine and screens
	Positivity & Happiness	Importance of a positive attitude. Importance of relationships for happiness. Gratitude.
	Depression	Removing the stigma of depression and mental illness. Seeking help.
	Gender Identity	Defining sex and gender. The gender identity spectrum.
	Cosmetic & Plastic Surgery	Risks of cosmetic surgery and procedures. Different circumstances for use - e.g. burns injuries, breast reconstruction etc. Cosmetic surgery as a social rather than individual issue.

11. Inter-agency working

We will continue to work with Children's Social Care, Police, and all other external agencies involved with the care of our children, for example CAMHS/other professionals involved in supporting children's mental health. DSLs/DDSLs/Wellbeing Leads will make referrals to partner agencies and contribute to meetings such as CAMHS reviews, Core Groups and CIN/LAC Reviews (in some cases remotely or by sending documentation) as needed.

13. Policy review arrangements

This policy will be reviewed centrally by Cognita by Alison Barnett (Regional Safeguarding Lead – Europe) and Beth Kerr (Director of Wellbeing) on a bi-annual basis.

At every review, any changes or amendments will be approved by Simon Camby (Group Director of Education) and Jayne Pinchbeck (Group Legal Counsel).

Ownership and consultation	
Document sponsor	Simon Camby - Group Director of Education
Document author	Alison Barnett - Regional Safeguarding Lead (Europe) Beth Kerr - Director of Wellbeing

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