**

*Like the Phoenix*

*We rise to our challenges*

*Strengthen our learning and Shine in*

*Our community*

**Wembley Primary School Wellbeing Policy**

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| Reviewed: | Approved by | Date of next review |
| March 2021 | March 2021- Senior Leadership Team | March 2023 |
| Completed by Sharon Griffith | | |

1. **Why Wellbeing and Emotional Health is important**

At Wembley Primary School, we aim to promote positive Emotional Health and Wellbeing for our whole school community (children, staff, parents and carers), and recognise how important these are to our lives. We see wellbeing in a broad sense which includes physical health and recognise that children’s emotional health is a crucial factor in their overall wellbeing and can affect their learning and achievement. All children go through ups and downs during their school career and some face significant life events. In 2017, about 1 in 10 children aged 5 to 16 had a diagnosable mental health need and these can have an enormous impact on quality of life, relationships and academic achievement. In many cases it is life-limiting.

The Department for Education (DfE) recognises that: “in order to help their children succeed; schools have a role to play in supporting them to be resilient and mentally healthy”. Schools can be a place for children and young people to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience. For some, school will be a place of respite from difficult home lives and offer positive role models and relationships, which are critical in promoting children’s wellbeing and can help engender a sense of belonging and community.

Our role in school is to ensure that children are able to manage times of change and stress, and that they are supported to reach their potential or access help when they need it. We also have a role to ensure that children learn about what they can do to maintain positive emotional health, what affects their emotional health, and where they can go if they need help and support.

Our aim is to help develop the protective factors which build resilience to mental health problems and to be a school where:

* All children, families and staff are valued.
* Children and staff have a sense of belonging and feel safe.
* Children and staff feel able to talk openly with trusted adults about their problems without feeling any stigma.
* Positive emotional health is promoted and valued.
* Bullying is not tolerated.
* PSHE is taught regularly and consistently and gives children opportunities to understand emotions, feelings and learn key skills in how to keep themselves physical and mentally healthy.

As a school, we recognise that is crucial that we promote staff emotional health and wellbeing, as well as that of our children and families.

1. **Purpose of the policy**

This policy sets out:

* How we promote positive emotional health for pupils, staff and families.
* How we identify and support children with emotional health needs.
* How we train and support all staff to understand emotional health issues and spot early warning signs to help prevent or address mental health problems.
* Where parents, staff and children can get further advice and support.
* How we aim to minimise mental health problems.

1. **Definition of emotional health and wellbeing**

We use the World Health Organisation’s definition of emotional health and wellbeing “ a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”.

Emotional health and wellbeing is not just the absence of mental health problems. We want all children/young people and staff to:

* feel confident in themselves.
* be able to express a range of emotions appropriately.
* be able to make and maintain positive relationships with others.
* cope with the stresses of everyday life.
* manage times of stress and be able to deal with change
* learn and achieve.

1. **Links to other policies**

This policy links to our policies on Safeguarding, Medical Needs, Anti-Bullying, SEND and Equalities and Relationships and Health Education. Links with the School’s Behaviour Policy are especially important because behaviour, whether it is disruptive, withdrawn, anxious, depressed or otherwise, may be related to an unmet mental health need.

1. **A whole school approach to promoting positive emotional health**

We take a whole school approach to promoting positive emotional health that aims to help children become more resilient, happy and successful and to prevent problems before they arise.

This encompasses seven aspects:

1. Creating an ethos, policies and behaviours that support emotional health and resilience, and which everyone understands.

2. Helping children to develop social relationships, support each other and seek help when they need it.

3. Helping children to be resilient learners.

4. Teaching children social and emotional skills.

5. Early identification of children who have emotional health needs and planning support to meet their needs, including working with specialist services.

6. Effectively working with parents and carers.

7. Supporting and training staff to develop their skills and their own resilience.

We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues. We therefore aim to create an open and positive culture that encourages discussion and understanding of these issues.

1. **Staff roles and responsibilities, including those with specific responsibility**

We believe that all staff have a responsibility to promote positive emotional health, and to understand about protective and risk factors for mental health. Wellbeing is everyone’s responsibility.

Some children will require additional help and all staff should have the skills to look out for any early warning signs of mental health problems and ensure that children with emotional health needs get early intervention and the support they need.

All staff should understand about possible risk factors that might make some children more likely to experience problems, such as: physical long-term illness, having a parent who has an emotional health problem, death and loss, including loss of friendships, family breakdown and bullying. They should also understand the factors that protect children from adversity, such as self-esteem, communication and problem-solving skills, a sense of worth and belonging and emotional literacy (see appendix 1 on risk and protective factors).

**Lead Members of staff**

Whilst all staff have a responsibility to promote the emotional health and wellbeing of students, and staff. The staff with a specific, relevant remit include

* Mrs Taylor Kent-Headteacher- Designated Safeguarding Lead (DSL), first point of contact for Safeguarding Issues and staff Wellbeing
* Deputy Head/Assistant Headteachers- Pupil and Staff Wellbeing within their phase
* Sharon Griffith Mental Health Lead and SENCO- Lead on supporting staff to understand their responsibilities to children whose emotional health problems mean they need special educational provision, coordination of staff training and referrals to school provision and external agencies
* Clare Benjamin-Lead on PSHCE and teaching about emotional health and Wellbeing.

We recognise that many behaviours and emotional problems can be supported within the School environment, or with advice from external professionals. Some children will need more intensive support at times, and there are a range of emotional health professionals and organisations that provide support to children with emotional health needs and their families.

Sources of relevant support include:

* Our Designated Safeguarding Lead (Mrs Taylor-Kent)
* Our Assistant Head/Phase Leaders
* Our School Mentor
* Our Assistant Head/SENCO/ Mental Health Lead
* Our Art Therapist
* Brent Wellbeing and Emotional Support Team (WEST)
* Brent CAMHS who provides 1:1 therapy and group work to children who are referred.
* Other Outside agencies such as Educational Psychology Service, Specialist community paediatrics service, Health team for children who are Looked After, Brent Wellbeing Centres and Brent Parent Carers

1. **Supporting children’ positive emotional heath**

*“Recognise that every interaction you have is an opportunity to make a positive impact on others.” Shep Hyken*

We believe the School has a key role in promoting children positive emotional health and helping to prevent mental health problems. We feel strongly that this should initially be done through day-to-day interactions. Our School has developed a range of strategies and approaches including:

*Pupil-led activities*

* School Council
* Wellbeing Champions

*Transition programmes*

* Home visits for nursery
* Nursery visits for Reception children
* Welcome days/transition events for new pupils to EYFS
* Transition Programme from EYFS to Year 1
* Individual transition programme for children with special needs (where appropriate)
* Transition programme for all new arrivals, including meeting with Assistant Head/Phase Leader
* Transition Programme to secondary schools which includes all Year 6 children
* Children with SEND having a member of staff mentor to support a smooth transition to secondary school

*Class activities*

* Wellbeing teaching programmes based on Jigsaw and PSHE Association resources
* Ways to Wellbeing- how to support own wellbeing
* ‘Zones of Regulation’- understanding of emotions and strategies to regulate these
* Use of Outside Learning/the Nature Garden
* Referring to the ‘Learning Pit’ and Growth Mindset

*Whole school*

* Broad and enriched curriculum
* Wellbeing week – whole school focus on doing things which make us feel good
* Enrichment days/Awareness days- Anti-bullying week, NSPCC
* Charity- focus on one charity from each of these: local, national, global
* School trips
* Displays and information around the School about positive emotional health and where to go for help and support
* Growth Mindset and resilience focus
* Range of afterschool clubs where pupils can pursue interests or hobbies
* Wellbeing Champions- pupil, staff and parent

*Small group activities*

* Lego Therapy
* Social skills group–to improve children’s communication skills around turn taking, dealing with issues, resolving conflict

*1:1 Support*

* Drawing and Talking Therapy
* Learning mentor
* Art therapy
* ‘Adult friends’
* Use of specific interventions/strategies such as, social stories
* Co-ordinated support from a range of external organisations such as Brent Social, Emotional and Mental Health Services and Therapists, Educational Psychology Services, Paediatricians, Inclusion support Services, family support workers,

*Teaching about emotional health and wellbeing*

Through PSHCE we teach the knowledge and social and emotional skills that will help children to be more resilient, understand about emotional health and be less affected by the stigma of mental health problems.

**EYFS & Key Stage 1:**

* To know that positive Wellbeing is ‘a healthy body and mind’
* Ways that they can look after their own wellbeing
* To recognise, name and describe feelings including good and not so good feelings.
* Simple strategies for managing feelings.
* How their behaviour affects other people.
* About empathy and understanding other people’s feelings.
* To form and maintain relationships
* To cooperate and problem solve.
* To motivate themselves and persevere.
* How to calm down.
* About change and loss and the associated feelings (including moving home, losing toys, pets or friends).
* Who to go to if they are worried
* About different types of teasing and bullying, that these are wrong and unacceptable.
* How to resist teasing or bullying, if they experience or witness it, whom to go to and how to get help.

**Key Stage 2 children learn:**

* Wellbeing includes: ‘mental, emotional, social and physical wellbeing’
* What positively and negatively affects their wellbeing and emotional health (including the media).
* Positive and healthy coping strategies to regulate their strong emotions such as frustration, anger and anxiety
* About good and not so good feelings.
* To describe the range and intensity of their feelings to others.
* To recognise and respond appropriately to a wide range of feelings in others.
* To recognise that they may experience conflicting emotions and when they might need to listen to their emotions or overcome them
* To deal with and resolve conflict effectively and fairly
* About resilience and how to develop a ‘growth mindset’
* How to motivate themselves and bounce back if they fail at something.
* How to empathise and be supportive of others.
* To be confident and ‘dare to be different’
* We are all unique. We must respect differences
* About change, including transitions (between Key Stages and schools), loss, separation, divorce and bereavement.
* About the consequences of discrimination, teasing, bullying and aggressive behaviours (including online bullying, prejudice-based language), as well as how to respond and ask for help if they are victims of this themselves.
* About the importance of talking to someone and how to get help.
* How to keep ourselves safe

1. **Identifying, referring and supporting children with emotional health needs**

**Our approach:**

* Provide a safe environment to enable children to express themselves and be listened to.
* Ensure the welfare and safety of children are paramount.
* Identify appropriate support for children based on their needs.
* Involve parents and carers when their child needs support.
* Involve children in the care and support they have.
* Monitor, review and evaluate the support with children and keep parents and carers updated.

We tailor our intervention to the vulnerabilities of pupils on a yearly basis. An audit is carried out yearly with support implanted as appropriate.

Interventions and support is offered in a variety of means which includes 1:1 meetings, large presentations, referrals, assemblies and PSHE lessons.

**Early Identification**

Our identification system involves a range of processes. We aim to identify children with emotional health needs as early as possible to prevent things getting worse. We do this in different ways including:

* Termly class wellbeing trackers identifying difficulties including attendance, punctuality, relationships, approach to learning, negative behaviour patterns, family circumstances, recent bereavement and health indicators
* Analysing behaviour, exclusions, attendance and sanctions.
* Using Leuven scales to identify children in EYFS who need support.
* Staff report concerns about individual children to phase leader.
* Parental Wellbeing questionnaires
* Zones of regulation ‘check ins’ and discussions
* Gathering information from a previous school at transfer.
* Parental meetings
* Enabling children to raise concerns to any member of staff.
* Enabling parents and carers to raise concerns to any member of staff or using school parent communication email.
* Weekly discussions within SLT meeting

Any member of staff concerned about a pupil will take this seriously and talk to the Assistant Head/Phase Leaders or the Mental Health Lead/ SENCO. Staff are aware that emotional health needs, such as anxiety, might appear as non-compliant, disruptive or aggressive behaviour which could include problems with attention or hyperactivity. This may be related to home problems, difficulties with learning, peer relationships or development.

**Disclosures by children and confidentiality**

We recognise how important it is that staff are calm, supportive and non-judgemental to children who disclose a concern about themselves or a friend. The emotional and physical safety of our children is paramount, and staff listen rather than advise. If there is a concern that a pupil is in danger of immediate harm, then the School’s Safeguarding procedures are followed. If there is a medical emergency, then the School’s procedures for medical emergencies are followed.

**Assessment, Interventions and Support**

All concerns are reported to the Assistant Heads/Phase Leaders or Lead for Mental Health and recorded. We then implement our assessment system, which is based on levels of need to ensure that children get the support they need, either from within the School or from an external specialist service. Our aim is to put in place interventions as early as possible to prevent problems escalating.

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| Need  Based on discussions by SLT meetings and staff, parents and children | Evidence-based Intervention and Support  The kinds of intervention and support provided will be decided in consultation with key members of staff, parents and children for example | Monitoring |
| Highest need | * CAMHS-assessment, 1:1 or family support or treatment, consultation with school staff and other agencies Other External agency support Other interventions e.g. art therapy * If the school, professionals and/or parents conclude that a statutory education, health and care assessment is required, we refer to the SEND policy and SEN School Information Report. | Children needing targeted individualised support will have provision/interventions monitored, reviewed and evaluated to assess the impact and if needed a different kind of support can be provided.  The support is overseen by the Mental Health Lead/SENCO. |
| Some need | Access to in school, art therapy, educational psychologist, learning mentor, 1:1 intervention, small group intervention |
| Low need | General support E.g., class teacher/TA, Adult Friend | |

**Support for friends**

We recognise that when a pupil is experiencing emotional health problems it can be challenging for their friends, who often want to help them but are not sure the best thing to do and can also be emotionally affected. We will consider on a case by case basis what support might be appropriate including one to one and group support.

We will involve the pupil who is suffering and their parents and consider what is helpful for friends to know and what they should not be told, how they can best support, things they should avoid doing/saying which may inadvertently cause upset and warning signs that their friend needs help.

We will also make information available about where and how to access information and support for themselves and healthy ways of coping with the difficult emotions they may be feeling.

1. **Working with specialist services to get swift access to the right specialist support and treatment**

In some case a pupil’s emotional health needs require support from a specialist service. These might include anxiety, depression, self-harm and eating disorders.

We have access to a range of specialist services and during the support will have regular contact with the service to review the support and consider next steps, as part of monitoring the children’s support.

School referrals to a specialist service will be made by the Mental Health Lead/SENCO following the assessment process and in consultation with the pupil (if appropriate) and his/her parents and carers.

**SEND and emotional health**

Persistent emotional health problems may lead to children having significantly greater difficulty in learning than the majority of those of the same age. In some cases, the child may benefit from being identified as having a special educational need (SEN).

1. **Involving parents and carers**

*Promoting emotional health*

We recognise the important role parents and carers have in promoting and supporting the emotional health and wellbeing of their children, and in particular supporting children who do have mental health needs.

We ask parents to inform us of any emotional or mental health needs their child has and any issues that they think might have an impact on their child’s emotional health and wellbeing.

To support parents and carers:

* We organise a range of activities such as workshops on protective and risk factors such as English as an additional language classes.
* We provide information and websites on emotional health issues and local wellbeing and parenting programmes. The information includes who parents can talk to if they have concerns about their own child or a friend of their child and where parents can access support for themselves.

When a concern has been raised, the School will:

* Contact parents and carers and meet with them (In almost all cases, parents and carers will be involved in their children’s interventions, although there may be circumstances when this may not happen, such as where child protection issues are identified.)
* Offer information to take away and places to seek further information
* Be available for follow up calls.
* Make a record of the meeting.
* Agree next steps.
* Discuss how the parents and carers can support their child.
* Keep parents and carers up to date and fully informed of decisions about the support and interventions provided.

**Signposting**

We will ensure that staff, students and parents are aware of sources of support within school and in the local community, what support is available within our school and local community and who it is aimed at. We will share relevant sources of support for the children in a range of ways including assemblies and within relevant parts of the curriculum. We will regularly highlight sources of support to staff and families using a range of digital platforms and meetings/forums.

1. **Involving children**

We seek pupil’s views about our approach, curriculum and in promoting whole school emotional health activities.

1. **Supporting and training staff**

Supporting and promoting the emotional health and wellbeing of staff is an essential component of a healthy school. We are committed to continue to implement measures to improve staff wellbeing and enhance staff motivation.

The school enhances Staff Wellbeing, learning and professional development through vehicles such as

* Constant consideration by SLT of staff workload
* Promoting healthy work life balance
* Creating a coaching culture
* Whole school training events
* Access to appropriate external training
* Consultation in training and support needs through regular review
* Induction training and information for new staff
* Provide additional support at times of particular stress, change and/or difficulty
* Have a responsive and listening culture, reacting quickly to problems
* Maintain contact with staff when they are absent
* Opportunities to discuss with the Headteacher any issues of worry/concern
* Curricular planning time within the school week
* Involving all staff in decision making and proposed change e.g. risk assessments, frequency of reporting to parents and so on.

The Headteacher will:

* Ensure the provision of a healthy working environment
* Take responsibility for her work life balance and be aware of the role model they are setting for others
* In collaboration with senior leaders, set positive role models
* Provide pastoral/welfare support for individual staff as required
* Ensure that all staff are treated in a fair, sensitive and confidential manner
* When issues arise, discuss options appropriate to the circumstances
* Support as far as possible any initiatives and recommendations in relation to staff welfare as advised by unions

Staff have access to support such as Brent’s Educational Psychology counselling service.

**Training**

* As a minimum, all staff will receive regular training about recognising and responding to emotional health issues as part of their regular child protection training in order to enable them to keep students safe.
* Specific emotional health training will be offered to staff including free online training suitable for staff wishing to know more about a specific issue.
* Training opportunities for staff who require more in-depth knowledge will be considered as part of our performance management process or NQT programme and additional CPD will be supported throughout the year where it becomes appropriate due to developing situations with one or more pupils.

Appendices Appendix 1 Protective and Risk factors (adapted from Mental Health and Behaviour DfE March 2016)

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|  | Risk Factors Protective Factors |  |
| In the Child | * Genetic influences * Specific development delay * Communication difficulties * Physical illness * Academic failure * Low self-esteem * SEND | * Being female (in younger children) * Secure attachment experience * Outgoing temperament as an infant * Good communication skills, sociability * Being a planner and having a belief in control * Humour * Problem solving skills and a positive attitude * Experience of success and achievement * Faith or spirituality * Capacity to reflect |
| In the Family | * Overt parental conflict including domestic violence * Family breakdown (including where children are taken into care or adopted) * Inconsistent or unclear discipline * Hostile and rejecting relationships * Failure to adapt to a child’s changing needs * Physical, sexual, emotional abuse or neglect * Parental psychiatric illness * Parental criminality, alcoholism or personality disorder * Death and loss – including loss of friendship | * At least one good parent-child relationship (or one supportive adult) * Affection * Clear, consistent discipline * Support for education * Supportive long-term relationship or the absence of severe discord |
| In the School | * Bullying * Discrimination * Breakdown in or lack of positive friendships * Negative peer influences * Peer pressure * Poor pupil to teacher relationships | * A whole-school approach to promoting good emotional health * Wellbeing seen as responsibility of all * Clear policies on behaviour and bullying * ‘Open door’ policy for children to raise problems * Positive classroom management * A sense of belonging * Positive peer influences * Culture of pupil voice |
| In the Community | * Socio-economic disadvantage * Homelessness * Disaster, accidents, war or other overwhelming events * Discrimination * Other significant life events | * Wider supportive network * Good housing * High standard of living * High morale school with positive policies for behaviour, attitudes and anti-bullying * Opportunities for valued social roles * Range of sport/leisure activities |

Appendix 2 Where to get information and support

For support on specific mental health needs

* Anxiety UK
* [www.anxietyuk.org.uk](http://www.anxietyuk.org.uk)
* OCD UK [www.ocduk.org](http://www.ocduk.org)
* Depression Alliance www.depressoinalliance.org
* Eating Disorders www.b-eat.co.uk and [www.inourhands.com](http://www.inourhands.com)
* National Self-Harm Network www.nshn.co.uk [www.selfharm.co.uk](http://www.selfharm.co.uk)
* Suicidal thoughts Prevention of young suicide UK – PAPYRUS: [www.papyrus-uk.org](http://www.papyrus-uk.org)

For general information and support

* www.youngminds.org.uk champions young people’s mental health and wellbeing
* www.mind.org.uk advice and support on mental health problems
* www.minded.org.uk (e-learning)
* www.time-to-change.org.uk tackles the stigma of mental health
* www.rethink.org challenges attitudes towards mental health