



Mental Health & Wellbeing Policy

Date	HT	Chair	Review Date
25.09.2024	M Hibbert	C Glynn	October 2025
19/09/25	M Hibbert	C Glynn	October 2026

1. Why Mental Health and Well-Being is Important

At Weston-on-Trent Primary School, we aim to promote positive mental health and well-being for our whole school community; pupils, staff, parents and carers, and recognise how important mental health and emotional well-being is to our lives in just the same way as physical health.

We recognise that children's mental health is a crucial factor in their overall well-being and can affect their learning and achievement. Persistent mental health problems may lead to pupils having significantly greater difficulty in learning than the majority of those of the same age.

The Special Educational Needs and Disabilities (SEND) Code of Practice identifies Social, Emotional and Mental Health as one of the four areas of Special Educational Need.

All children go through ups and downs through their school career and some face significant life events. About 10% of children aged 5 to 16 have a diagnosable mental health need and these can have an enormous impact on their quality of life, relationships and academic achievement.

The Department for Education (DfE) recognises that: "in order to help their pupils 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 pupil's well-being and can help provide a sense of belonging and community.

In school we aim to help children to manage times of change and stress, be resilient, and to feel supported to reach their potential and access help when they need it. We also ensure that pupils learn about what they can do to maintain positive mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues 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 be a school where:

- all pupils are valued
- pupils have a sense of belonging and feel safe
- pupils feel able to talk openly with trusted adults about their problems without feeling any stigma
- positive mental health is promoted and valued
- bullying is not tolerated

In addition to children's well-being, we recognise the importance of promoting staff mental health and well-being

2. Purpose of the Policy

This policy sets out:

- how we promote positive mental health
- how we prevent mental health problems
- how we identify and support pupils with mental health needs
- how we train and support all staff to understand mental health issues and spot early warning signs to help prevent mental health problems getting worse
- key information about some common mental health problems
- where parents, staff and pupils can get advice and support

3. Definition of Mental Health and Well-Being

The World Health Organisation's definition of mental health and wellbeing is as follows:

... 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.

Mental health and well-being is not just the absence of mental health problems. We want all children/young people 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

4. Links to other Policies

This policy links to our policies on child protection and safeguarding, anti-bullying, positive behaviour management, personal social health education (PSHE) and relationships, health and sex education (RHSE) policies and special educational needs and disabilities (SEND) policy.

Links with the Behaviour Management policy and Anti Bullying Policy are especially important because behaviour, whether it is disruptive, withdrawn, anxious, depressed or otherwise, may be related to an unmet mental health need. We consider ***behaviour to be communication*** that we need to understand.

5. A Whole School Approach to Promoting Positive Mental Health

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

This encompasses seven aspects:

1. creating an ethos, policies and behaviours that support mental health and resilience that everyone understands
2. helping pupils to develop social relationships, support each other and seek help when they need to
3. helping pupils to be resilient learners
4. teaching pupils social and emotional skills and an awareness of mental health
5. early identification of pupils who have mental 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 resilience

We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues and aim to create an open and positive culture that encourages discussion and understanding of mental health issues. We aim to be a 'talking school' with an 'Open Door Policy'.

8. Roles and Responsibilities

We believe that all staff have a responsibility to promote positive mental health, and to understand about protective and risk factors for mental health. 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 pupils with mental health needs get early intervention and the support they need.

All staff understand about possible risk factors that might make some children more likely to experience problems; such a physical long-term illness, having a parent who has a mental health problem, death and loss, including loss of friendships, family breakdown and bullying. They 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.

The school's mental health team (*mental health first aider/SENCo/designated safeguarding Lead (headteacher) and deputy designated safeguard Lead (also PHSE lead)*)

- leads on and works with other staff to coordinate whole school activities to promote positive mental health
- provides advice and support to staff and organises training and updates
- keeps staff up-to-date with information about what support is available
- advise staff on teaching about mental health
- is the first point of contact and communicates with mental health services
- leads on and makes referrals to services

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 mental health professionals and organisations that provide support to pupils with mental health needs and their families. Support includes:

- Safeguarding/Child Protection Team
- Support staff to manage mental health needs of pupils
- SENCO who helps staff understand their responsibilities to children with special educational needs and disabilities (SEND), including pupils whose mental health problems mean they need special educational provision.
- School nurse
- CAMHS core meetings to support staff to manage mental health needs of pupils

7. Supporting Pupils' Positive Mental Health

We believe we have a key role in promoting pupils' positive mental health and helping to prevent mental health problems. Our school has developed a range of strategies and approaches including;

Pupil-led Activities

- Campaigns and collective worships to raise awareness of mental health

Transition Support

- Support for vulnerable children, for example, Speech and Language (SALT) support, small group work such as Positive Play or Social Communication groups
- Transition meetings with parent/carers, pupils and relevant staff
- Dedicated transition meeting with secondary schools for vulnerable children
- Key Adults might support secondary school visits with vulnerable pupils

Class Activities

- Worry monsters
- Mindfulness and breathing/meditation in class

Whole School

- Mindfulness activities (Being Me)
- PHSE resources (Jigsaw)
- Collective worship themes
- Using reading to explore themes and learn about emotions, difference, loss, bullying, change, resilience, etc. - the whole school may explore the same PHSE themed book.
- Displays and information around the school about positive mental health and where to go for help and support both within the school and outside the school.

Small Group Activities

- Small friendship, social skills groups
- Lunch club
- Nurture rooms (The Hive) for children needing time and space away from the classroom.
- Sensory Rooms

Teaching about Mental Health and Emotional Well-being

- Through PSHE we teach the knowledge and social and emotional skills that will help pupils to be more resilient, understand about mental health and help reduce the stigma of mental health problems.

Key Stage 1 and Key Stage 2 children learn to explore feelings through PHSE topics using the Jigsaw PHSE scheme of learning:

- Being Me in My World
- Celebrating Difference
- Dreams and Goals
- Healthy Me
- Relationships
- Changing Me

Our approach is to:

- provide a safe environment to enable pupils to express themselves and be listened to
- ensure the welfare and safety of pupils as paramount
- identify appropriate support for pupils based on their needs
- involve parents and carers when their child needs support
- involve pupils in the care and support they have
- monitor, review and evaluate the support with pupils and keep parents and carers updated

8. Early Identification

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

- Identify individuals that might need support
- working with the school office staff who are often the first point of contact with families seeking support
- induction meetings for pupils / families joining after the Reception year
- analysing behaviour, exclusions and attendance using CPOMS

- pupil surveys
- staff report concerns about individual pupils to the mental health first aider/SENCo or headteacher/designated safeguarding lead
- worry monsters in each class for pupils to raise concerns which are checked by the class teacher
- weekly staff briefing for staff to raise concerns about individual children
- gathering information from a previous school at transfer or transition
- parental meetings
- enabling pupils to raise concerns to class teacher and support staff
- enabling parents and carers to raise concerns through the school class teacher or to any member of staff - we have an 'Open Door Policy'

All staff have had training on the protective and risk factors (see Appendix 1), types of mental health needs (see Appendix 2) and signs that might mean a pupil is experiencing mental health problems. Any member of staff concerned about a pupil will take this seriously and talk to the mental health first aider/SENCO/headteacher/designated safeguarding lead.

These signs might include:

- non-verbal behaviour
- isolation from friends and family and becoming socially withdrawn
- changes in activity or mood or eating/sleeping habits
- lowering academic achievement
- talking or joking about self-harm or suicide
- expressing feelings of failure, uselessness or loss of hope
- an increase in lateness or absenteeism
- not wanting to do PE or get changed for PE
- physical signs of harm that are repeated or appear non-accidental
- wearing long sleeves in hot weather
- repeated physical pain or nausea with no evident cause

Staff are aware that mental 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.

If there is a concern that a pupil is in danger of immediate harm then the school's child protection procedures are followed. A risk assessment and plan will be made.

Verbal Disclosures by Pupils

We recognise how important it is that staff are calm, supportive and non-judgmental to pupils who verbally disclose a concern about themselves or a friend. The emotional and physical safety of pupils is key and staff listen rather than advise. Staff are clear to pupils that the concern will be shared with the headteacher/designated safeguarding lead and recorded on CPOMs in order to provide appropriate support to the pupil.

Non-Verbal Disclosures by Pupils

Staff also recognise persistent and unusual non-verbal disclosures in behaviours in line with the NICE (National Institute for Health & Care Excellence) recommendation that behaviour may be an unmet need or message.

Confidentiality

All disclosures are recorded and held on the pupil's confidential file in CPOMS, including date, name of pupil and member of staff to whom they disclosed, summary of the disclosure and next steps.

Assessment, Interventions and Support

All concerns are reported to the headteacher/designated safeguarding lead and recorded. We then implement our assessment system based on levels of need to ensure that pupils 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.

We recognise that just like physical health, mental health and emotional well-being can vary at any given time and is fluid and changes, there are no absolutes.

Need The level of need is based on discussions at the regular Inclusion meetings/panel with key members of staff	Evidence-based Intervention and Support - the kinds of intervention and support provided will be decided in consultation with key members of staff, parents and pupils (examples below)	Monitoring
Highest need	CAMHS-assessment, 1:1 or family support or treatment, consultation with school staff and other agencies	All pupils needing targeted individualised support will have an Individual Care Plan drawn up setting out - <ul style="list-style-type: none"> • The needs of the pupils • How the pupil will be supported • Actions to provide that support • Any special requirements Pupils and parents/carers will be involved in the plan. The plan and interventions are monitored, reviewed and evaluated to assess the impact e.g. through a
	School based nurture sessions -1:1 support	
	Educational Psychologist referral	
	External agency support that provides 1:1 support and group work	
	If the school, professionals and/or parents conclude that a Education, Health and Care assessment is required, we refer to the SEND policy and SEN School Information Report.	

Some need	Access to in school Nurture Rooms (The Hive).	Strengths and Difficulties Questionnaire Multi-agency meetings and regular reviews and feedback with parents/carers
	1:1 interventions, small group intervention, skills for life/wellbeing programmes, circle of friends, Positive Play sessions.	
Low need	Time to talk with class teacher/TA, lunch club, junk modelling club.	Early Help Referral and Children's Services if appropriate Discussion, advice and support in Child and Mental Health Services (CAMHS) core hours for key staff An electronic log is kept and there are monthly safe-guarding team meetings Weekly staff briefing

9. Working with Specialist Services to get swift access to the right Specialist Support and Treatment

In some case a pupil's mental health needs require support from a specialist service. These might include anxiety, depression, school refusal and other complex needs.

We make links with a range of specialist services and have regular contact with the services to review the support and consider next steps, as part of monitoring the pupils' provision.

School referrals to a specialist service will be made by the Inclusion Manager/SENCO following the assessment process and in consultation with the pupil and his/her parents and carers. Referrals will only go ahead with the consent of the parent/carer and when it is the most appropriate support for the pupil's specific needs.

Specialist Service	Referral process
Child and Adolescent Mental Health Service (CAMHS)	Accessed through school, GP or self-referral
School Counsellor	Accessed through the Headteacher/SENCO
Educational Psychologist	Accessed through the Headteacher/SENCO
Early Help Referral	Accessed through the Headteacher/SENCO

10. Involving Parents and Carers

Promoting Mental Health

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

To support parents and carers:

- we provide information and signposting to organisations on our websites on mental health issues and local wellbeing and parenting programmes.
- have an Open Door Policy.
- supporting parents and carers with children with mental health needs through sensitive and supportive regular meetings and signposting.

When a concern has been raised the school will:

- contact parents and carers and meet with them
- in most case parents and carers will be involved in their children's interventions, although there may be circumstances when this may not happen, such as child protection issues.
- offer information to take away and places to seek further information
- be available for follow up calls
- make a record of the meeting
- agree an Action Plan
- 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

Parents and carers will always be informed if their child is at risk of danger.

We make every effort to support parents and carers to access services where appropriate. Pupils are our primary concern, and in the rare event that parents and carers are not accessing services we will seek advice from the Local Authority. We also provide information for parents and carers to access support for their own mental health needs.

11. Involving Pupils

- we seek pupils' views and feedback about our approach and whole school mental health activities through Pupil Voice, surveys, class questions and suggestion boxes
- Our worship and be the change groups discuss how we can improve mental health awareness in school.

12. Supporting and Training Staff

We want all staff to be confident in their knowledge of mental health and wellbeing and to be able to promote positive mental health and wellbeing, identify mental health needs early in pupils and know what to do and where to get help (see Appendix 3). Those staff with a specific responsibility have more specialised training and where possible access to supervision from mental health professionals.

Staff training to raise awareness of Mental Health and emotional well-being topics have been accessed through Being Me staff meetings and INSET day training from Nina Jackson.

Supporting and promoting the mental health and wellbeing of staff is an essential component of a healthy school and we promote opportunities to maintain a healthy work life balance and wellbeing for all staff.

13. Monitoring and Evaluation

This policy was made in collaboration with the whole school. Its effectiveness will be monitored by the SLT and reported to the board of governors. This policy will be reviewed every three years or sooner if deemed necessary.

Appendix 1

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

	Risk Factors	Protective Factors
In the Child	<ul style="list-style-type: none"> • Genetic influences • Specific development delay • Communication difficulties • Physical illness • Academic failure • Low self-esteem • SEND 	<ul style="list-style-type: none"> • 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 • Experiences of success and achievement • Faith or spirituality • Capacity to reflect
In the Family	<ul style="list-style-type: none"> • 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 	<ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • Bullying • Discrimination • Breakdown in or lack of positive friendships • Negative peer influences • Peer pressure • Poor pupil to teacher relationships 	<ul style="list-style-type: none"> • Clear policies on behaviour and bullying • 'Open door' policy for children to raise problems • A whole-school approach to promoting good mental health • Positive classroom management • A sense of belonging

		<ul style="list-style-type: none"> • Positive peer influences
In the Community	<ul style="list-style-type: none"> • Socio-economic disadvantage • Homelessness 	<ul style="list-style-type: none"> • Wider supportive network • Good housing
	<ul style="list-style-type: none"> • Disaster, accidents, war or other overwhelming events • Discrimination • Other significant life events 	<ul style="list-style-type: none"> • 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

Specific mental health needs most commonly seen in school-aged children

For information see Annex C Main Types of Mental Health Needs Mental Health and Behaviour in School DfE March 2016

<https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2>

Annex C includes definitions, signs and symptoms and suggested interventions for Anxiety (including panic attacks, phobias and obsessive compulsive disorder OCD), depression, eating disorders, substance misuse and self-harm.

The DfE guide does not include specific information on suicidal thought

Suicidal Thoughts

Young people may experience thoughts and feelings about wanting to end their lives. Some young people never act on these feelings but may openly discuss and explore them, while other young people die suddenly from suicide without any apparent warning signs.

**Whether you are a friend,
family member or it's
someone you just met.
We all have a role to help**

Useful Helplines

*Young People should call:
ChildLine*

Tel: 0800 1111

Samaritans

Tel: 116 123

Young Minds Parents Helpline

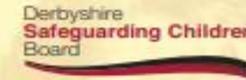
Tel: 0808 8025544

Adults should call Samaritans

Tel: 116 123

**What you can do to
help someone who
is feeling suicidal**

**Mental and emotional
distress is everyone's
business and we can all
help to make a difference**



Top Tips for helping someone feeling suicidal

Stay Calm - It may be uncomfortable listening but try not to let your own emotional response prevent you from hearing what the person is saying and what their body language is telling you.

Talking about self-harm and suicide does not increase the risks!

Listen - Just being listened to can be a brilliant support and bring great relief to people, particularly if they have never spoken to anyone about their self-harming or suicidal thought before. The fact that they have chosen you means they feel comfortable speaking to you.

Don't be seen to 'pass them on'.

Take Them Seriously - Do not ignore or dismiss the feelings or behaviour of someone nor see it as attention- seeking or manipulative. Do not be judgemental.

Most people who self-harm are not suicidal, but people who self-harm are more likely to accidentally complete suicide.

Confidentiality and Young People - When talking to a young person you should never agree to keep risk taking behaviour to yourself. Be sensitive and explain from the start that in order to help keep them safe you may need to pass on information to their parents/carers, your line manager or safeguarding lead or CAMHS.

Confidentiality and Adults - Do not keep concerns to yourself - helping someone is a wonderful opportunity but it can also be stressful. Share your concerns with someone you can trust, they may be able to help you to consider and manage the risk.

Clarify whether or not there are immediate needs for medical attention or urgent help to keep the person safe and respond accordingly.

For urgent medical attention Tel: 999

Non urgent medical help Tel: 111

or persons own GP

Do Not Act in Haste - Give the person time to try and find out what is causing their distress and what will be of help. Act according to the needs raised - this will often be encouraging the person to see their GP who will be able to provide medical support and if required make a referral to relevant helping services, like mental health services.

Make sure you are available for the person for the following few days /weeks. If you are not available make sure they know where to seek support - see over.

Appendix 3MENTAL HEALTH AND WELL-BEING FRAMEWORK FOR SCHOOLS

This document has been produced following research undertaken by the Educational Psychology Service into school exclusions within Derbyshire. The findings highlighted key areas of inclusive practice which were seen to have a positive impact in supporting the mental health and wellbeing of children, young people and adults in the school community.

Using the outcome areas from the research, this framework reflects the positive work taking place in our schools and signposts support and resources available.

This new Mental Health and Well-being information from DCC proposes to be a web-based resource, reflecting best practice and materials which have been quality assured and validated by a cross professional team within the county and including schools.

It will be suggested that the information is used as a guide and signposting resource and that schools work in partnership to prioritise their needs and support each other.

Best practice in schools involved in the research included the following:

- Promoting a positive ethos and a sense of belonging for all members of the school community
- Having clear and consistently applied policies which support teaching, learning and behaviour
- Actively encouraging positive relationships across the school community
- Focus on developing staff skills and wellbeing
- Working in partnership with others e.g. other schools, the community, outside agencies
- Listening to the child / young person's voice
- Assessing the needs of children and young people as the start of an 'assess, plan, do, review' cycle
- Designing the curriculum and its delivery flexibly to meet the needs of all students
- Supporting the acquisition of new skills and learning through specific interventions
- Planning for reasonable adjustments which may be required, either prior to, or on entry to school, via the school's accessibility plan

MENTAL HEALTH AND WELL-BEING FRAMEWORK FOR SCHOOLS

Key Areas	PRINCIPLES	SUPPORT
Ethos	<ul style="list-style-type: none"> • A positive vision developed by the whole school community • Care and respect agenda permeating all of school life • Belief that every child and young person is entitled to belong within your school community • Belief that staff, children and young people respond best to positive approaches • Every child and young person feels safe, wanted and can achieve • A culture of open listening • Encourage links with the local community 	<ul style="list-style-type: none"> • The Exclusions Self-Evaluation Framework (SEF) http://services.derbyshire.gov.uk/Page/10120# • Emotional and Mental Health, A resource for Schools https://www.derbyshire.gov.uk/site-elements/documents/pdf/social-health/children-and-families/mental-health-and-wellbeing/emotional-and-mental-health-toolkit.pdf Includes a whole school audit tool • Five Ways to Well-Being www.derbyshire.gov.uk/wellbeing • https://issuu.com/neweconomicsfoundation/docs/five_ways_to_well-being?viewMode=presentation • Mind- Ed are free modules to complete online: <ul style="list-style-type: none"> ○ https://www.minded.org.uk/ • Whole-school approaches A range of training is available from Local Authority Services: See http://services.derbyshire.gov.uk/Services

PUBLIC

Examples of available training:

- Ethos & Values
- Inclusive classrooms
- Leading Mentally Healthy Schools
- Restorative approaches
- Attachment Aware Schools
- Transition support
- Staff and pupil Resilience
- Anti-Stigma, Be A Mate Campaign @ BeAMateCampaign
- School Sports Partnerships

PUBLIC

Staff skills and wellbeing

- Awareness of the health, safety and welfare of staff
- Professional and personal support for staff
- A culture of staff supporting each other
- Working together to create a no-blame culture in which all staff can ask for help when needed
- Dealing with issues in a timely way, so that staff receive support quickly
- Solution Focused Approaches

- Training in staff Resilience as part of a varied programme of CPD available <http://services.derbyshire.gov.uk/Services>
- LA counselling service (01629 536954)
- Specialist Community Advisors (CAMHS) <https://www.camhsnorthderbyshire.nhs.uk/specialist-community-advisors/> (North Derbyshire)
- Public Health Nurses in Schools
- Solution Circles
- Solution focused approaches
- Anti-Stigma Campaign – Be a Mate <http://services.derbyshire.gov.uk/Training>
- Mental Health Training (MH Champion, MH Awareness and Mental Health First Aid Youth <https://www.derbyshire.gov.uk/social-health/health-and-wellbeing/mental-health-and-wellbeing/mental-health-training/mental-health-training.aspx>)
- Healthy Workplaces Derbyshire <https://www.derbyshire.gov.uk/business/healthy-workplaces/healthy-workplaces.aspx>
- Staff reflective coaching, peer-to-peer support and supervision: Paula.clay@derbyshire.gov.uk
- Self-harm and Suicidality – <https://www.derbyshirescb.org.uk/site-elements/documents/pdf/self-harm-practice-guidance.pdf>

PUBLIC

<p>Policies in Partnership</p>	<ul style="list-style-type: none"> • Policies developed in partnership with parents and governors • Clear communication systems to ensure consistency of approach across staff • Training and induction for new staff • Clear links between SEND, pastoral and curricular departments • Acknowledge mental health in other policies, including safeguarding, attendance and anti-bullying • Policies reflect the school's inclusive ethos • Policies take account of the individual circumstances of vulnerable or disadvantaged pupils • Children and young people friendly versions of policies 	<ul style="list-style-type: none"> • Templates for mental health policies are available e.g. from Charlie Waller trust, see: https://www.cwmt.org.uk/mental-health-policy • A model school policy guidance for positive behaviour support (including physical interventions) is available from the Behaviour Support Service and from the Derbyshire Children's Services Health and Safety department
<p>Relationships</p>	<ul style="list-style-type: none"> • School staff consider the quality of interactions they have with children and young people and seek opportunities to have positive experiences together • Focus on respect, repair and moving on • Staff team work together to support each other • Recognition that everyday interactions make the biggest difference to wellbeing in school • Collaborative, fun activities between staff, children and young people • Culture of listening • Clear procedures for welcoming new children and young people • Fostering peer support • Creating practice that ensures children and young people have opportunities to talk to adults about their needs and truly have a voice in the running of the school 	<p>Training available in in:</p> <ul style="list-style-type: none"> • Restorative approaches • Circles of Friends • Peer support • Attachment Awareness • Staff/Children/Young People interaction styles <p>http://services.derbyshire.gov.uk/Services</p> <ul style="list-style-type: none"> • PSHE Matters for Primary Schools- A scheme of work and training package. Education Improvement Service, Yvonne.wright@derbyshire.gov.uk Relationships Matter for Secondary Schools – A Scheme of Work. Jane.O'byrne@derbyshire.gov.uk • Samaritans DEAL https://www.samaritans.org/your-community/samaritans-

PUBLIC

[education/deal-developing-emotional-awareness-and-listening](#)

<p>Partnerships</p>	<ul style="list-style-type: none"> • Develop good relationships with Parents, carers and guardians, • Welcome all of the above to be part of the school community no matter what their individual circumstance may be • The views of parents, carers and guardians are actively sought on a regular basis • Schools work with each other to share responsibility and gain mutual support • Schools develop active, solution focussed partnership • Develop good communication systems with outside agencies to create an open dialogue with everyone involved in a child's life • Develop a sense of the school belonging to its local community 	<p>Partners:</p> <ul style="list-style-type: none"> • Locality Children's Partnerships • Local Authority Services • Health Services • Community Services • Local Businesses • School Sports Partnerships
<p>Voice of the Child/ Young Person</p>	<ul style="list-style-type: none"> • Involve children and young people in decision-making about their school. • Involve children and young people in reflecting about their sense of belonging in the school and contributing to decision making • Involve children and young people in setting targets and reviewing their own progress, enabling growing independence within school 	<ul style="list-style-type: none"> • Training in peer support and mediation • Youth Council / participation team • Anti-Stigma, Be A Mate Campaign – Mental Health Peer Education Programme for Year 3-Year 13 @BeAMateCampaign yvonne.wright@derbyshire.gov.uk

	<ul style="list-style-type: none"> • Ensure that more vulnerable children and young people have the opportunity to be heard 	
<p>Flexible response</p>	<ul style="list-style-type: none"> • Reconsider the lived experience of the child/young person • Assess the child / young person’s individual needs in order to plan their inclusion in school • Review what has already been done to successfully support children and young people and use this to develop a more detailed plan • Respond flexibly with a readiness to adapt to the changing and emerging needs of the child / young person • Use a solution focussed approach to planning, with commitment and persistence • Use evidence informed interventions • Positive Support Plans 	<p>Assess</p> <ul style="list-style-type: none"> • Structured observations • Audit of the classroom environment • Functional analysis of behaviour • The Boxall Profile www.nurturegroups.org • The Anna Freud Toolkit provides guidance on assessment of mental health and wellbeing along with a compendium of tools https://www.annafreud.org/what-we-do/schools-in-mind/resources-for-schools/mental-health-toolkit-for-schools/ <p>Plan</p> <ul style="list-style-type: none"> • Multi–Element Behaviour Plans; • Emotional Wellbeing plans <p>Do</p> <p>Training or interventions available include:</p> <ul style="list-style-type: none"> • Positive play/support • Tailor Made programmes • PROACT-SCIP^{UK}® / Keeping safe • ELSA • Nurture • Mindfulness <p>Review</p>

Contacts:

Alison.hemstock@derbyshire.gov.uk

Deborah.page@derbyshire.gov.uk or

Cs.educationalpsychology@derbyshire.gov.uk

James.creaghan@derbyshire.gov.uk

Julie.griffiths@derbyshire.gov.uk

Lizzie.watt@derbyshire.gov.uk

Yvonne.wright@derbyshire.gov.uk

<http://services.derbyshire.gov.uk/Services>

<https://localoffer.derbyshire.gov.uk/>

<https://www.derbyshire.gov.uk/home.aspx>

Behaviour Support Service

Educational Psychology

Public Health

Inclusion Pathways Team/Tailor-Made Programmes

Virtual School

Education Improvement Service

Derbyshire Services for Schools

Derbyshire Local Offer for SEND

Derbyshire County Council