

We are Brilliant!

Fairburn View Primary School – Mental Health and Well Being Policy		
Date:	Review Date:	Written by:
September 2019	September 2020	Jenny Allison

Introduction:

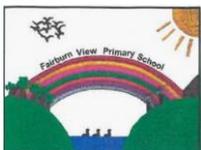
At Fairburn View Primary School, we aim to promote positive mental health and wellbeing for our whole school community (children, staff, parents and carers), and recognise how important mental health and wellbeing is to our lives in just the same way as physical health. Mental Health affects all aspects of a child's development including their cognitive abilities and their emotional wellbeing. The Department for Education (DfE) says, "In order to help their children succeed; schools have a role to play in supporting them to be resilient and mentally healthy".

Mental Health and Wellbeing Policy, Intent, Implementation and Impact Overview

The intent of our school is to create a learning and working environment where all community members feel valued, safe and secure. A place where all stakeholders feel confident to share any concerns they may have. Our role is to ensure that all community members are able to manage times of change and stress, and that they are supported to reach their full potential or access help when they need it. We will ensure that children learn about what they can do to maintain positive mental health, what affects their mental health, how they can reduce the stigma surrounding mental health issues, and where they can go if they need help and support.

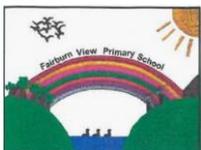
Child Protection Responsibilities

Fairburn View Primary School is committed to safeguarding and promoting the welfare of children and young people, including their mental health and emotional wellbeing. The school expects all staff and volunteers to share this commitment. We recognise that children have a fundamental right to be protected from harm and that pupils cannot learn effectively unless they feel secure.



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Intent	Research link	Implementation	Impact
Intention 1: Promote positive mental health	World Health Organisation WHO – <i>“a state of wellbeing 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”</i>	Provide a welcoming, cheerful all-inclusive environment, where all stakeholders feel valued, cared for, important and happy.	School will be a welcoming all inclusive environment. All stakeholders feel valued, happy and important.
Intention 2: Prevent mental health problems	The Department for Education (DfE), <i>“In order to help their children succeed; schools have a role to play in supporting them to be resilient and mentally healthy”.</i>	Foster a culture which encourages all members to openly discuss their problems, including mental health problems without the concern of stigma or judgement. Create an ethos, policies and behaviours that support mental health and resilience, and which everyone understands.	All members of the community feel able to (if they wish) discuss their problems including their mental health, knowing they are not at risk of stigma or judgement. School policies support mental health and resilience.
Intention 3: Identify and support children, staff, parents and carers with mental health needs		Open door policy to share concerns, have open discussions. Staff are identified within school to speak to confidentially when required.	Staff training has enabled to support others with mental health and well-being issues.
Intention 4: Training for staff to understand mental health issues and spot early warning signs to help prevent or address mental health problems.		Inset Day in September 2019 on Well Being and Mental Health. Staff Briefings& Safeguarding Training SENDCO briefings	Staff are trained in mental health and well-being. Staff are able to spot early warning signs.
Intention 5: Promote key information about some common mental health problems		Information shared in: SENDCO Briefings Staff INSET day Staff briefing notifications Children’s MSP, EHCP available for all staff on g:drive to gain an understanding of each child. Key stage meetings	Relevant information is shared with staff, timely and appropriately.



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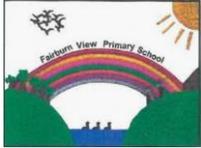
<p>Intention 6: Let children, staff, parents and carers know where they can get further advice and support.</p>		<p>Training on Childhood ACES Signs to be placed in school showing who the relevant staff are. Assemblies to cover these topics, delivered by the SLT. Talk to the Bear initiative with West Yorkshire Police and worry boxes to be implemented in KS2.</p>	<p>Identified staff and safe spaces are known to the whole community.</p>
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Mental Health: Risk Factors and warning signs

Anxiety:

All children and young people get anxious at times; this is a normal part of their development, welfare concerns are raised when anxiety is impairing their development, or having a significant effect on their schooling or relationships.

<p>Anxiety disorders include;</p> <ul style="list-style-type: none"> • Generalised anxiety disorder (GAD) • Panic disorder and agoraphobia • Acute stress disorder (ASD) • Separation anxiety • Post traumatic stress disorder • Obsessive Compulsive Disorder (OCD) • Phobic disorders (including social phobia) 	<p>Symptoms of an Anxiety Disorder, can include;</p> <p>Physical</p> <ul style="list-style-type: none"> • Cardiovascular – palpitations, chest pain, rapid heartbeat, flushing and heartburn. • Respiratory- hyperventilation, shortness of breath, hiccups and burping. • Neurological – dizziness, headache, sweating, tingling and numbness. • Gastrointestinal – dry mouth, nausea, vomiting, diarrhoea, bloating and increased gas. • Musculoskeletal – muscle aches and pains, restlessness, tremor and shaking. <p>Psychological</p> <ul style="list-style-type: none"> • Unrealistic and or excessive fear and worry • Mind racing or going blank
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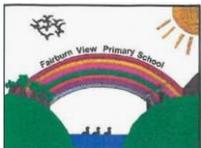


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	<ul style="list-style-type: none"> • Decreased concentration and memory • Difficulty making decisions <p>Irritability, impatience, anger</p> <ul style="list-style-type: none"> • Confusion • Restlessness or feeling on edge, nervousness • Tiredness, sleep disturbances, vivid dreams • Unwanted unpleasant repetitive thoughts <p>Behavioural effects</p> <ul style="list-style-type: none"> • Avoidance of situations • Repetitive compulsive behaviour e.g. excessive checking • Distress in social situations • Urges to escape situations that cause discomfort (phobic behaviour)
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Depression

<p>Risk Factors:</p> <ul style="list-style-type: none"> • Experiencing other mental or emotional problems • Divorce of parents • Perceived poor achievement at school • Bullying • Developing a long term physical illness • Death of someone close • Break up of a relationship <p>Some people will develop depressions in a distressing situation, whereas others in the same situation may not.</p>	<p>Symptoms:</p> <p>Emotions</p> <ul style="list-style-type: none"> • Sadness • Anxiety • Guilt • Anger • Mood Swings • Lack of emotional responsiveness • Helplessness and helplessness <p>Thinking</p> <ul style="list-style-type: none"> • Frequent self-criticism • Self blame • Pessimism • Impaired memory and concentration
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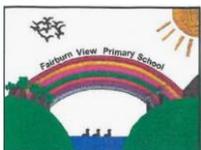


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	<ul style="list-style-type: none"> • Indecisiveness, confusion and a tendency to believe others see you in a negative light • Thoughts of death and suicide <p>Behaviour</p> <ul style="list-style-type: none"> • Crying spells and withdrawal from others • Neglect of responsibilities • Loss of interest in personal appearance and motivation • Engaging in risk taking behaviours such as self harm, misuse of alcohol and other substances • Risk taking sexual behaviours <p>Physical</p> <ul style="list-style-type: none"> • Chronic fatigue, lack of energy and sleeping too much or too little • Overreacting or loss of appetite and constipation • Weight loss or gain • Irregular menstrual cycle • Unexplained aches and pains
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Suicidal Thoughts

<p>Think or Feel</p> <ul style="list-style-type: none"> • Hopeless, like there is no point living • Tearful and overwhelmed by negative thoughts • Unbearable pain that you can't imagine ending • Useless, unwanted or unneeded by others • Desperate, as if you have no other choice • Like everybody would be better off without you • Cut off from your body or physically numb 	<p>Experience</p> <ul style="list-style-type: none"> • Poor sleep and early waking • Change in appetite, weight gain or loss • No desire to take care of yourself, for example neglecting your physical appearance • Wanting to avoid others • Self-loathing and low self esteem • Urges to self-harm
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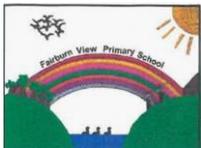
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Any suggestion that a pupil or member of our school community may be considering suicide, should be taken very seriously. Members of the SLT should be informed immediately and appropriate action taken as a matter of urgency. Parents should be informed at the earliest opportunity. 999 should be called if a suicide attempt has been made. A risk assessment should take place and recommendations made. The need for Further medical / therapeutic intervention / psychiatric referral should be made if appropriate.

Eating Disorders

Eating disorders are a serious mental illness and should not be taken lightly. Eating disorders are not always about 'food' but about feelings. The way a person interacts with food may make them feel more able to cope or feel more in control.

Risk Factors	Warning Signs
<ul style="list-style-type: none">• Difficulty expressing feelings and emotions• A tendency to comply with other's demands• Very high expectations of achievement• A home environment where food, eating, weight or appearance have a disproportionate significance• An over protective/ controlling home environment• Poor parental relationships and arguments• Neglect, physical, emotional or sexual abuse• Overly high family expectations or achievement• Being bullied, teased or ridiculed due to weight or appearance• Pressure to maintain a high level of fitness / low body weight	<ul style="list-style-type: none">• Weight loss/ gain• Dizziness / tired / fainting• Feeling cold• Hair becomes dull or lifeless• Swollen cheeks• Callused knuckles• Tension headaches• Sore throats / mouth ulcers• Tooth decay• Restricted eating / over eating• Skipping meals• Scheduling activities during lunch• Strange behaviour around food• Wearing baggy clothes• Wearing several layers of clothing• Excessive chewing of gum / drinking water• Increased conscientiousness• Increasing isolation / loss of friends



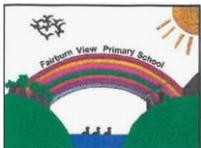
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	<ul style="list-style-type: none">• Believes they are fat when they are not• Secretive behaviour• Visits the toilet immediately after meals• Excessive exercise• Control around food; removal of food groups , quantities and avoidance of social events <p>Psychological signs</p> <ul style="list-style-type: none">• Preoccupation with food• Sensitivity about eating• Denial of hunger despite lack of eating• Feeling distressed or guilty after eating• Self dislike• Fear of gaining weight• Excessive perfectionism
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Self Harm

Self Harm is any behaviour where the intent is to deliberately cause harm to one's own body by:

- Cutting scratching, scraping or picking skin
- Swallowing inedible objects
- Taking an overdose of prescription or non prescription drugs
- Swallowing hazardous materials or substances
- Burning or scalding
- Hair pulling
- Banging or hitting the head or other parts of the body
- Scouring or scrubbing the body excessively
- Abusing drugs and alcohol
- Eating Disorders



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<p>Risk Factors</p> <ul style="list-style-type: none">• Depression• Anxiety• Poor communication skills• Low self esteem• Poor problem solving skills• Hopelessness• Impulsivity• Drug or alcohol abuse <p>Family Factors</p> <ul style="list-style-type: none">• Unreasonable expectations• Neglect, physical, emotional or sexual abuse• Poor parental relationships and arguments• Depression, self harm or suicide in the family <p>Social Factors</p> <ul style="list-style-type: none">• Difficulty in making relationships /loneliness• Being bullied or rejected by peers	<p>Possible warning signs</p> <ul style="list-style-type: none">• Changes in eating/ sleeping habits• Increased isolation from peers and family• Changes in activity and mood• Lowering academic achievement• Talking or joking about self harm and suicide• Abusing alcohol or drugs• Expressing feelings of failure, uselessness or loss of hope• Changes in clothing• Unwillingness to participate in certain sports activities e.g. swimming
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Any member of staff who is aware of a member of the school community engaging in, or suspected of self harm, should follow the school's safeguarding policy. They should record their concerns on CPOMs and speak to a member of SLT. SLT will seek the appropriate action to then support this person.