



Wellbeing and Mental Health Strategy for Students and Staff Updated October 2024

World Health Organisation Statement

Mental health is a state of wellbeing in which every individual realises her or his 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.

At Aylesbury High School, we aim to promote positive mental health for every member of our staff and student body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable students, and staff. In addition to promoting positive mental health, we aim to recognise and respond to poor mental health. By developing and implementing practical, relevant and effective mental health strategies, we can promote a safe and stable environment for students and staff affected both directly and indirectly by poor mental health.

1 Scope

This document describes the school's approach to promoting positive mental health and wellbeing. It is intended as guidance for all staff and governors. It should be read in conjunction with the following policies in cases where a student's mental health overlaps with or is linked to medical issues or where a student has an identified special educational need:

- Child Protection and Safeguarding Policy
- Supporting Students with Medical Needs Policy
- Special Educational Needs Policy

2 Aims

The strategy aims to:

- Promote positive mental health and wellbeing in all staff and students
- Increase understanding and awareness of common mental health issues
- Alert staff to early warning signs of mental health
- Provide support to staff working with young people with mental health issues
- Provide support to students suffering with poor mental health and their peers and parents/carers

3 Lead Members of Staff

Whilst all staff have a responsibility to promote the mental health of students, the following staff have a specific relevant remit:

- Lisa Westcott Mental Health and Wellbeing Lead. Deputy DSL
- Harriet Queralt Designated Safeguarding Lead
- Miranda Crafts - SENDCo
- Year Heads

Any member of staff who is concerned about the mental health or wellbeing of a student should speak to the appropriate Year Head in the first instance. If there is a fear that the student is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the DSL, member of the DSL Team or Headteacher. If the student presents a medical emergency then the normal procedures for medical emergencies should be followed, including alerting Matron and contacting the emergency services if necessary. Where a referral to Child and Adolescent Mental Health Services (CAMHS) is appropriate, this will be led and managed by Lisa Westcott.

4 Individual Care Plans

An individual care plan may be drawn up for a student causing concern or who has received a diagnosis pertaining to their mental health. The plan will be drawn up by a member of the wellbeing team with the student, their parents/carers and relevant health professionals. The plan may include:

- Details of a student's condition
- Special requirements and precautions
- Medication and any side effects
- What to do, and who to contact in an emergency
- The role the school can play

5 Teaching about Mental Health

The skills, knowledge and understanding needed by our students to keep themselves and others physically and mentally healthy and safe are included as part of our developmental Learning for Life (L4L) curriculum. The specific content of lessons will be determined by the specific needs of the cohort we are teaching but there will always be an emphasis on enabling students to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

6 Signposting

We will ensure that staff, students, parents/carers are aware of sources of support within school and in the local community via our pastoral support pages on the school website and in the AHS Newsletter.

We will display relevant sources of support throughout areas in school. These include in, the wellbeing area, outside the library, outside Matron's room, opposite the lower floor toilets in the corridor leading to reception and either in or close to the Year Heads' offices. We will regularly highlight these sources of support through notices in the toilets, the daily notices, via peer support groups, assemblies and within relevant parts of the curriculum.

Whenever we highlight sources of support, we will increase the chance of student help-seeking by ensuring students understand:

- What help is available and who is it aimed at
- How to access the help and why
- What is likely to happen as a result of a request for help

7 Warning Signs

School staff may become aware of warning signs which indicate a student is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with the appropriate Head of Year in the first instance. Possible warning signs include:

- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating/sleeping habits
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood
- Lowering of academic achievement
- Talking or joking about self-harm or suicide
- Abusing drugs or alcohol
- Expressing feelings of failure, uselessness or loss of hope
- Changes in clothing - e.g. long sleeves in warm weather
- Secretive behaviour
- Skipping PE or getting changed secretly
- Increased lateness or absenteeism from school
- Repeated physical pain or nausea with no evident cause

8 Managing Disclosures

A student may choose to disclose concerns about themselves or a friend to any member of staff so all staff need to know how to respond appropriately to a disclosure. If a student chooses to disclose concerns about their own mental health or that of a friend to a member of staff, the member of staff's response should always be calm, supportive and non-judgemental. Staff should listen, rather than advise and our first thoughts should be of the student's emotional and physical safety rather than exploring 'Why?'

All disclosures should be recorded on **CPoms** as soon as possible unless it is a Child Protection

situation (see section 3 above).

9 Serious Incidents

When school has been informed of a serious mental health incident, such as suicidal intent or significant self harm, the following actions should be considered, although all situations will differ:

- Meeting with student
- Meeting with parents
- Communication with any external agencies involved
- Safety plan formulated and agreed by all parties and shared with necessary staff
- Daily checkins and bag searches if specified in safety plan
- Provision of space (eg for supervised eating if required)
- Time Out card provided
- Regular communication with parents and external agencies
- Half termly review of safety plan

10 Confidentiality

We should be honest with regards to the issues of confidentiality. If it is necessary for us to pass our concerns about a student on then we should discuss with the student:

- Who we are going to talk to
- What we are going to tell them
- Why we need to tell them

We should never share information about a student without telling them first. Ideally we would receive their consent, though there are certain emergency situations when information must be shared with another member of staff and/or parent/carer. Disclosures relating to poor mental health will always be shared with the WBM so that continuity of care and extra sources for idea and support are provided. The WBM can also help safeguard the emotional wellbeing of the member of staff working with the young person, so that they do not feel solely responsible for the student. Staff should always ensure that they cannot be overheard when sharing information of this nature.

Students are encouraged to share information with parents/carers themselves and are normally given 24 hours to do so before the school contacts the parent/carer. Students will be given the option of us informing parents/carers for them or with them. If a young person gives us reason to believe that there may be underlying child protection issues, parents/carers should not be informed but information shared with the DSL immediately.

11 Working with Parents/Carers

Where it is deemed appropriate to inform parents/carers, we will be sensitive but direct in our approach. Before disclosing to parents/carers we will consider the following questions:

- Is a face to face meeting or telephone communication preferable?
- Does the student want to attend the meeting or be present when the phone call takes place
- The aims of the meeting/discussion

It can be shocking and upsetting for parents/carers to learn of issues and many may respond with anger, fear or upset during the first conversation. We should be accepting of this, within reason, and give the parent/carer time to reflect. We should always highlight further sources of information and give them leaflets, where possible, to help them understand the information being shared.

Sharing sources of further support aimed specifically at parents/carers can also be helpful too eg parent helplines/forums. We should always provide clear means of contacting us with further questions and consider booking in a follow up meeting or phone call right away, as parents often have many questions as they process the information. Finish each meeting with agreed next steps and always record a summary of the meeting on CPOMS.

12 Working with All Parents/Carers

In order to support parents/carers we will:

- Highlight sources of information and support about common mental health issues on our school website
- Ensure that they are aware of who to talk to if they have concerns about their child or one of their child's friends
- Share ideas about how they can support positive mental health
- Keep them informed about the mental health topics taught in L4L

13 Supporting Peers

When a student is suffering from mental health issues, it can be a difficult time for their friends. Friends often want to support but do not know how. In the case of self-harm or disordered eating, it is possible that friends may learn unhealthy coping mechanisms from each other. In order to keep peers safe, we will consider on a case by case basis which friends may need additional support. Support will be provided either in one to one or group settings and will be guided by conversations with the student who is suffering. We will discuss prior to the meeting:

- What is helpful for friends to know and what they should not be told
- How friends can best support
- Things friends should avoid doing/saying which may inadvertently cause upset
- Warning signs they may suggest further support is required

Additionally, we will highlight to peers:

- Where and how to access support for themselves

- Safe sources of further information about their friend's condition
- Healthy ways of coping with the difficult emotions they may be feeling

14 Training

As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular child protection training in order to enable them to keep students safe. We will host relevant information via the notice board in the staff room and via the weekly bulletin in addition to Friday briefings.

Training opportunities for staff who require more in depth knowledge will be considered as part of our performance management process and additional CPL will be supported throughout the year where it becomes appropriate due to developing situations with one or more students.

Where the need to do so becomes evident, we will host training sessions for staff to promote learning or understanding about specific issues related to mental health. Suggestions for individual, group or whole school CPL should be discussed with CPL lead in Senior Leadership Team.

Provision and Impact Updated June 2024

Mental Health and Wellbeing Support	Impact	Future Developments
<p>SCHEDULED MEETINGS</p> <p>So far this academic year on average LW has scheduled to see 3 students on a daily basis. These are predominantly KS4 students, Looked after Children and students under the DSL team.</p> <p>FK has scheduled to see on average 6 Key Stage 3 students on a daily basis.</p> <p>MSc has scheduled to see on average 6 Key Stage 5 students on a daily basis.</p>	<p>With external mental health services being under increasing pressure, and subsequent waits of over a year for young people to be seen. Students are accessing more support in school.</p> <p>Having additional members to the Wellbeing team has resulted in more targeted support offered to students in KS3 particularly in Year7, and Yr6 transition, and students in KS5, particularly Yr12 transfer students from other schools.</p> <p>Targeted early support provides students with skills and strategies to help manage their mental health.</p>	<p>Long term plan is to have an additional space within the area.</p>

<p>DROP INs</p> <p>Students with a timeout card or agreement drop into Wellbeing for timeout.</p> <p>On average there are 6-8 visits a day from different students. This will vary depending on the time of year. Students will take on average 10-15 minutes time out.</p> <p>In addition:</p> <p>So far this academic year LW has seen on average 2 students drop in on a daily basis.</p> <p>FK has seen 3 students on average who drop in on a daily basis.</p> <p>MSc has seen 3 students on average who drop in on a daily basis.</p> <p>SN (Matron) sees on average 32 students per day, depending on time of year this can be more or less.</p>	<p>Having an allocated space for wellbeing has provided a more conducive environment for students to take time out, use strategies and return to lessons.</p>	<p>Long term development of the wellbeing area will provide a quieter environment.</p>
<p>SUPERVISED EATING</p> <p>In August 2023 the Children's Commissioner report showed that diagnosis of eating disorders had doubled. The numbers of AHS students diagnosed reflected this ,the number of students diagnosed have recently slowed both nationally and within AHS. The numbers this term have been between 4 and 6 students.</p>	<p>LW has been able to offer more structured supervised eating which has supported the student's transition back to school and reduced the disruption to their school day. In addition, it has also provided respite from home and for parents.</p>	
<p>COUNSELLOR</p> <p>The school counsellor sees 3-5 students a week. There are currently two students on the waiting list.</p> <p>Appointments for students in KS3 and KS4 are rotated as students do</p>	<p>Students access support in a safe and familiar environment. If required they are also offered a space after each appointment to process and have time before continuing with their school day.</p>	

<p>not like to miss the same lesson each week. KS5 students are usually seen in their study periods. Angela is flexible and if needed will continue to see students during the school holidays.</p>		
<p>INTERVENTIONS</p> <p>Stress Bucket ABC Resilience Study stress Bereavement Memory box. 6 week SH programme KOOOTH Self Harm safety plans Papyrus stay safe plans Girls On Board Sleep Diaries Strength and Difficulties Questionnaire School Triggers Questionnaire Home Triggers Questionnaire</p> <p>6th form Wellbeing Mentors who meet with identified students on a one to one basis.</p>	<p>Gives students targeted and ongoing support.</p> <p>Early identification through screening tools such as Classroom Triggers and Strength and Difficulties Questionnaire to provide bespoke early interventions for identified students.</p>	<p>Plans to work with parents through sharing resources to enable them to support their children more effectively.</p> <p>Upload more resources to the school website.</p>
<p>MONITORING</p> <p>The Health and Wellbeing Team have a ten minute team brief at the start of each day, and meet fortnightly.</p> <p>Twice termly Team Around The Student meetings led by LW and involving, SENDCo, DSL and YH.</p>	<p>Regular team meetings facilitate communication regarding specific students which facilitates consistency of support.</p> <p>Fortnightly meetings enable a review of interventions and exploration of new ideas.</p> <p>RAG rated student list ensures that all students are included on the list to avoid students slipping through the cracks. Lists are updated fortnightly by HEQ and YHs. Half termly meeting reviews support being given.</p>	

PEER SUPPORT		
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Year 9 Buddies:

Four from each house who support Yr6/7 transition day. Buddies also visit forms once a week in Year 7 to facilitate students to get to know each other and offer guidance and reassurance.

Drop in for year 7 students. 2-6 students attend each week. Yr9 buddies chat and play games with the year 7s who attend.

Student Health and Wellbeing Ambassadors:

- 2 Wellbeing Ambassadors
- 2 Health Ambassadors
- 1 Young Carer Ambassadors

They run dropins, and groups. Work with Young Carers, students with long term health conditions such as epilepsy and diabetes. They also support students who may be struggling with life in or out of school.

Year 9 Buddies provide a unique perspective remembering and sharing their own experiences of joining AHS.

This provides an opportunity and space for Year 7s who maybe struggling to settle into AHS, and making friends. They have the opportunity to talk through any problems they have. Numbers decrease as we move into the spring/summer terms. However there are yr 7 students who like to continue to come to access the informal support and often bring friends that they have made, or recommend other yr 7s who may be struggling.

Student Health and Wellbeing Ambassadors provide a unique perspective having the lived experience of being an AHS student.

Gives students a space to talk about anything. Specifically helpful for year 9 s and year 8s worried about Aberdyfi. As well as friendships, and subjects that they may be struggling with.

The WA will signpost to subject ambassadors, form tutors and HofYr as required in choosing options,.

Wellbeing Ambassadors

As part of the long term plan to provide additional space to accommodate more students following increasing numbers attending the groups/sessions.

<p>Present assemblies.</p> <p>Health and Wellbeing Club Timetable</p> <p><u>Yr 8 and 9 Drop In</u> Run by a Year 13 Wellbeing Ambassador. 1-4 students used to drop in each week.</p> <p><u>AHS Young Young Carer Club</u> 1-6 students attend each week. This is run by Yr10 Young Carers and overseen by FK</p> <p><u>AHS Young Carers</u> 6-8 students attend each week. Run by Yr13 Young Carer Ambassador, overseen by MSc.</p> <p><u>First Aid Club</u> 8 students attend. Run by Yr13 Health Ambassadors overseen by SN.</p> <p><u>Chill Club and Bee Club</u> 6-12 students attend</p>	<p>presented an assembly on World Mental Health Day.</p> <p>Health Ambassadors presented an assembly on the importance of maintaining good health.</p> <p>Young Carer Ambassador and Young Carers presented an assembly for Young Carer Awareness Day. Provides a quiet calm space for young carers to access 1:1 conversation.</p> <p>Provides a space for young carers to have some fun and sit and talk to others who understand what it is to be a young carer.</p> <p>Provides a space for students to L</p> <p>Learn first aid skills.</p> <p>Provides a space for students to play games, chat and meet students outside of their form and year groups.</p>	
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Run by Wellbeing Ambassadors		
<p><u>Wellbeing Reps</u></p> <p>There is one Wellbeing Rep in each form, in all year groups. Once a fortnight they will promote and discuss Health and Wellbeing concerns and feedback to the Health and Wellbeing team. They also provide ideas for form activities, such as a quiz, and chair dancing</p>		
<p>WORK WITH PARENTS</p> <p>Enhanced transitions in place.</p>		<p>Offer more parent sessions</p> <p>Investigate use of parent resources from providers such as Moonshot and How To Thrive.</p>

Having three members in the Wellbeing Team has enabled more students to be seen consistently.

Having an allocated space has meant more drop in and group support can be offered.