Mental health and emotional wellbeing at HSA: A guide for everyone

What is mental health?

"Good mental health means being generally able to think, feel and react in the ways that you need and want to live your life. But if you go through a period of poor mental health you might find the ways you're frequently thinking, feeling or reacting become difficult, or even impossible, to cope with. This can feel just as bad as a physical illness, or even worse"

-Mind Charity https://www.mind.org.uk/information-support/types-of-mental-health-problems/mental-health-problems-introduction/about-mental-health-problems/

In school, we recognise that everyone has mental health and that mental and physical health are closely connected. We seek to promote the emotional wellbeing of children, staff and the wider community. Feeling safe and happy helps children learn and ***let their light shine***. Learning helps boost children's self-esteem and positive feelings. Our emotional and mental wellbeing priorities at HSA are:

- To provide the right environment for everyone to thrive
- To help children understand and their mood and feelings
- To support children during their life experiences
- To help parents to support their children and families

Please talk with us if your child is experiencing mental health difficulties or if there are any changes at home that might be affecting their wellbeing.

We all have times when things are difficult and we need support. We are here to help.

On the next page is a brief guide to how we promote good mental health at HSA and support children with emotional needs or mental health difficulties. It shows you our pathways to support.

HSA Wellbeing Pathway

	What do we do at school?	How do children get this support?	What kinds of needs get this support?
Everyone	▪ Make sure all children are learning at their own level and all underlying learning needs are addressed ▪ Teach age appropriate RSHE/PSHCE lessons, including talking about mental health and wellbeing ▪ Train all staff in trauma-informed approaches ▪ Use Therapeutic Thinking to take a therapeutic approach to behaviour ▪ Train staff to co-regulate with children ▪ Have a Mental Health First Aider in school ▪ Address emotional wellbeing and mental health in Collective Worship ▪ Celebrate good wellbeing through our Values ▪ Timetable outdoor learning ▪ Provide Clubs and extra curricular activities designed to promote wellbeing ▪ Hold community events and awareness raising days in school so children can give back ▪ Root our curriculum in place so that children have strong community support	All children have this support as part of our day to day teaching and learning.	These approaches aim to keep children mentally healthy and in a good state of emotional wellbeing. Using these strategies will help us to identify needs early and find the right support.
Some children	▪ Have daily "touch base" time with an adult in their year group team ▪ Have access to personal resources like mood diaries, transitional objects and calming activities ▪ Are taught personal calming, breathing and grounding techniques ▪ Have support from other organisations, like Rivers ESC or Communication and Autism Team ▪ Have "soft starts" or different starts or ends to the school day ▪ Have an identified key worker to talk with if they are feeling worried ▪ Access Ready to Learn Circuits	Children talk with adults in school about their emotional or mental health needs Class teacher identifies mental health needs in school through observation and/or discussion with the child and makes adjustments in class Class teacher and SENCo/MHL share concerns and create a care plan or personal learning plan or identify needs in Provision Planning and make reasonable adjustments Parents talk with class teachers or the SENCo about their concerns and action is taken Children's services or other professionals make school	Low mood at times Low level anxiety Separation anxiety Bereavement and the grieving process Body image issues Extra fears, sometimes irrational Nightmares or trouble sleeping

	▪ Have low-threat "buffer" activities 1:1 with an adult to give them time to talk ▪ Have pre-teaching and post-teaching around PSHCE lessons to help them understand ▪ Have personal communication systems for when they feel stressed ▪ Have a designated "safe space" for when they feel anxious ▪ Have changes made to break times or lunchtimes ▪ Are given priority in wellbeing activities and clubs ▪ Have additional adult check-ins during the day	aware of mental health concerns and school are asked to take action	Sensory Dysregulation Difficulties regulating behaviour, including what parents describe as 'meltdowns' or 'tantrums' at home Attention needing behaviours Acting out or showing anxiety through impulsive, angry or destructive behaviours
A few children	▪ Need their school day adapted and personalised to help them manage their mental health, which may include increased adult support ▪ Are on a reduced timetable or phased re-integration to school ▪ Are referred to the mental health support services for support with anxiety, depression, eating disorders or other wellbeing issues ▪ See their GP to talk about mental health needs ▪ Have time with the school Family Worker to develop: social skills, protective behaviours, emotional literacy and may have 1:1 time to support in challenging circumstances ▪ Access Draw and Talk in school, wither 1:1 or in a group ▪ Have bereavement therapy in school ▪ Have Art Therapy with the school in-house Art Therapy student from the University of Hertfordshire.	▪ Discussion between teachers, parents, Family Worker and the SENCo if other strategies have not worked and mental health is deteriorating ▪ Parents report ongoing severe anxiety or other mental health concerns that are serious or escalating or hard to manage at home ▪ Child shows or parent discusses ongoing moderate mental health needs, often with some medical needs, family impact or self-care difficulties. Parents and SENCo agree on a referral, verbal consent is needed. ▪ Parents and/or school after discussion feel that there may be underlying medical needs or that medical support may help. School can write a letter of support to take to a GP ▪ Class teachers, parents or children identify difficulties processing life events like bereavement, early difficult experiences,	Persistent low mood or depression Significant generalised anxiety Significant separation anxiety Emotion Based School Refusal Emotional needs communicated through extreme behaviours History of trauma, recent traumatic event or early trauma Bullying at school or outside school Signs of deteriorating mental health or early signs of mental illness Complex bereavement Extremely low self esteem, resilience and ability to care for self

		changes at home, friendship issues ▪ A child is struggling with the demands of life changes, trauma processing, school or home factors. The need is long term and having a significant impact on daily life. The Family worker or SENCo talks with parents and the child. Written consent is needed. A term of weekly sessions begins.	
A very small number of children	▪ Are referred to Child and Adolescent Mental Health Services including Step 2 • Are supported by children's services or Intensive Family Support Team to access support through in-house psychology or ARC ▪ Are referred to the emergency services	▪ A child discloses serious mental health difficulties, signs of mental illness or extreme difficulties with emotional wellbeing ▪ Parents report dangerous behaviours at home or significant difficulties managing emotional needs ▪ Adults around the child recognise signs of a diagnosable mental illness, including eating disorders, depression, psychosis, anxiety disorders ▪ A child is considered by adults at home to be a risk to themselves or others ▪ A child talks about wanting to take their own life ▪ The SENCo or Mental Health Leads discuss with the child and parents the best course of action ▪ Adults around the child call emergency mental health services or dial 999	Signs of poor mental health or mental illness are increasingly apparent, through behaviour or other communication with the child Mental health needs are linked to additional vulnerabilities A child is self-harming, including through misuse of substances or violence Poor mental health is accompanied by poor physical health Behaviour is increasingly extreme or dangerous, including radicalised behaviours Suicidal ideation

For parents

Support is available for parents too. A good way to look after your child's mental health is to look after your own too. It's ok not to be ok and parenting is hard. Always seek help if you need it, and look out for your friends.

Type of support	How to access it
Family Worker Support	Contact school. Our Family Worker will be in touch. She can work with you directly or signpost you to other services.
Medical support	Please talk to your GP or phone 111 and choose the 'mental health services' option. If you are worried about your own mental health or illness, please seek medical support. School can write a supporting letter for family concerns.
Local organisations	Please access the Local Offer page for all types of support: The Hertfordshire SEND Local Offer You can self-refer to children's services if you need urgent help: 0300 123 4043.
National organisations	Mind is the national mental health charity. They have lots of information. https://www.mind.org.uk/ In an emergency please: Call the Samaritans 116 123 Call 999
IF YOU OR SOMEONE YOU KNOW IS AT IMMEDIATE RISK OF HARM CALL 999	