Greenhead College Corporation

MENTAL HEALTH AND WELL-BEING POLICY

Date drafted:	February 2018
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Contents

Introduction

At Greenhead College we are committed to improving the outcomes of young people and we fully embrace our role and the importance of a college-wide approach to supporting the mental health and well-being of students and the wider community.

Our purpose and principles guide everything we do to **be exceptional,** including our approach to mental health and well-being and this Framework.

- Every person matters.
- Create a safe space to grow and flourish.
- Be the best you can be.
- Pursue excellence.

Our *Mental Health and Well-being Intent Statement* outlines our overarching principles and beliefs about supporting mental health and well-being across our college community. This policy outlines how the principles and beliefs shared in our *Mental Health and Well-being Intent Statement* are brought to life and implemented to support and promote positive mental health and well-being across the college community.

It is intended as guidance for all staff, including support staff and governors, and should be read in conjunction with the following policies:

- SEND Policy
- Admissions Policy
- Safeguarding Policy
- Equality and Diversity Policy
- Fitness to Study Policy

The policy **aims** to:

- Support and enhance the College's Purpose and Principles and the College's Strategic Plan 2023 – 2030.
- Embrace the principles, beliefs, and aims shared in our *Mental Health and Well-being Intent Statement*.
- Promote positive mental health and well-being across the whole college community.
- Outline how our *Mental Health and Well-being Framework* is embedded across the college.
- Ensure staff are aware of the tiered support available at college for students.
- Support staff working with young people with social, emotional, and mental health difficulties.
- Increase understanding and awareness of common social, emotional, and mental health difficulties, helping staff to notice the early warning signs and support students appropriately.

Policy Review

This policy is reviewed annually. Additionally, it is reviewed and updated as appropriate to reflect personnel changes. If you have any questions or suggestions about improving this policy, this should be addressed to *Sarah Holbrook*, Mental Health Lead – mhlead@greenhead.ac.uk.

Section 1: Developing a Whole College Approach

We believe in a whole-college approach to mental health and well-being, which involves all parts of the college working together - the senior leadership team (SLT), teachers, and all college staff, as well as parents/carers and support in the wider community.

Link Governor

We have a link governor appointed with a mental health and well-being focus: *Heather Roebuck*. This governance role supports the SLT at a 'critical friend' and champions mental health.

Mental Health Lead

Sarah Holbrook is our Mental Health Lead (MHL). This role ensures all elements of the whole college approach are pulling in the same direction to create and implement a vision to promote an ethos of well-being across the College.

Staff with Designated Mental Health Responsibility

All staff have a responsibility to promote and support the mental health and well-being of students. The staff with a specific, relevant remit:

Simon Lett	Principal
Maureen Bunter	Deputy Principal
Usman Anwar	Designated Safeguarding Lead
	Assistant Principal (Student Support and Welfare)
Magdaline Glynn	Deputy Designated Safeguarding Lead
	Assistant Principal (Student Support and Welfare)
Tom Rowley	Assistant Principal (Quality of Education)
Mark Mitchell	Assistant Principal (Quality of Education)
Claire Parr	Director of SEND and Inclusion
Marc Tomlinson	Lead Counsellor
Sarah Holbrook	Mental Health Lead/College Counsellor
Siobhan Corby	Safeguarding Officer
Personal Tutors	Details can be found on the College website.
	https://www.greenhead.ac.uk/supported-learning/personal-tutors
Safeguarding Team	Details can be found on the College website.
	Safeguarding - Greenhead College

The Mental Health Working Party Group

This group meets at least once every half term and consists of the following members of staff. It includes representation from the Senior Leadership Team (SLT), and a diverse mix of staff from across the college who have an interest in being involved. Membership is regularly reviewed.

Sarah Holbrook (Chair)	Mental Health Lead and College Counsellor
Simon Lett	Principal
Maureen Bunter	Deputy Principal and Safeguarder
Usman Anwar	Designated Safeguarding Lead
	Assistant Principal (Student Support and Welfare)
Magdaline Glynn	Deputy Designated Safeguarding Lead
	Assistant Principal (Student Support and Welfare)
Tom Rowley	Assistant Principal (Quality of Education)
Mark Mitchell	Assistant Principal (Quality of Education)
Claire Parr	Director of SEND and Inclusion
Helen-Mackey Bowen	High Need Provision Manager
Anna Shaw	Senior Tutor and Safeguarder
Matthew Burrows	Senior Tutor and Safeguarder
Marc Tomlinson	Lead Counsellor
Jen Rothery	Human Resources
Carly Granger	Marketing and Liaison Manager
Inchug Kelsang	College Counsellor
Lisa DuLieu	Business Studies Teacher
Nadia Iqbal	Personal Tutor
Sarah Allen	Personal Tutor / English Teacher
Carol Mitchell	Team Leader - Student Area Supervisors
Ximena Lopez	Languages Assistant
Nadia Iqbal	Personal Tutor

The aim of the working party is to drive forward the development of a whole college approach to mental health and well-being. This includes identifying appropriate staff development and training, monitoring/promoting staff, and student well-being, developing robust student referral systems and critically reviewing the implementation of mental health and well-being support.

Greenhead College Student Association (GCSA)

GCSA is a representative student body that offers a crucial student perspective, helping gauge the impact of whole college approach to mental health and well-being initiatives and processes, and to generate new ideas for change. It is a channel that helps us capture student-centred feedback and insight. It can also highlight any concerns.

Each tutor group elects a tutor representative to be a part of GCSA. From these representatives an Executive Committee is elected. This committee meets every Tuesday lunchtime and is a group that the MHL links in with. The key contact is the elected Welfare Officer.

Curriculum - Teaching about Mental Health

Tutor Programme - Skills, knowledge and understanding needed by our students, to promote resilience and help keep themselves and others physically and mentally healthy and safe, are included as part of our A1 and A2 Tutorial Programme.

The content of social, emotional, and mental health tutorials is regularly reviewed and adapted to reflect the specific needs of the cohort, along with feedback from the MHWP on current issues occurring across college.

We ensure that we teach mental health and well-being issues in a safe and sensitive manner which helps rather than harms. Lesson plans and materials are written and produced in conjunction with the college Lead Counsellor.

Mental and Physical Health (M+P) Weeks - There is a Mental and Physical Week is in the college calendar each term. More detail about these can be found in the *Mental Health and Well-being Framework Strategy*. Their intention is to:

1. Embrace the development of awareness and understanding of the importance of mental health and well-being both in and out of the classroom.
2. Highlight to students the importance placed upon well-being by the college and that this extends to all aspects of college life.
3. They offer an opportunity to explore with students the relationship between well-being and academic outcomes.
4. Open a channel of communication between staff and students and allow a process of reflection on teaching/learning and the learner journey.

Enrichment - The College has an award-winning enrichment programme; 100+ options are generally available for students to sign-up to. The aim is to provide many opportunities for students to develop new interests, boost their resilience and determination to succeed, support your mental and physical well-being, and develop employability skills.

Staff Training and CPD

Mental Health and well-being are everyone's responsibility. We are introducing a tiered approach to the training of college staff in relation to mental health and well-being.

As a minimum, all staff receive regular training about recognising and responding to mental health and safeguarding issues as part of their regular child protection training; to enable them to keep students safe.

- **Tier 1: Mental Health Awareness Session**

  The goal we are working towards is for all student-facing staff do a basic awareness session about mental health and well-being. Dates are offered a couple of times in an academic year.

- **Tier 2 – Mental Health First-Aid Training**

  Personal Tutors, ALS and SLT staff hold, or are working towards, a Mental Health First Aid Qualification approved by MHFA England. Training is also offered to the wider

teaching and support staff population if they feel it would be helpful to their role. Part of the training explores the importance of taking care of their own mental health and Well-being and protecting themselves when supporting students with difficulties.

- **Training and Supervision for the Safeguarding Team**

  In addition, the safeguarding team undergo specialist safeguarding training. The safeguarding team also has regular, professional supervision to help manage and process any second-hand trauma.

- **Optional Additional Training**

  www.minded.org.uk provides free online training resources about young people's mental health which is suitable for staff who want to know more about a specific issue.

  Educare is another option that has bitesize chunks of learning that can be access by all staff. All members of staff have a login to this service.

  Training opportunities for staff who require more in-depth knowledge will be considered as part of our performance management process and additional CPD will be supported throughout the year.

  Suggestions for individual, group, or college wide CPD can be discussed with Mark Mitchell or Tom Rowley.

  The Lead Counsellor is available for staff to discuss concerns that are burdening them about a student in one-off supervision sessions.

Supporting Staff Mental Health and Well-being

Staff mental health and well-being is a key element of embracing and promoting a whole-college approach to mental health and well-being and supporting students.

All employees have access to an externally provided employee healthcare and well-being support service – via Kirklees Employee Healthcare. This offers a range of support, including - Access to emotional well-being support such as counselling, Mini health MOTS, well-being events, 24-hour telephone support via an "Employee Assistance" programme, and physiotherapy.

Regarding the physiotherapy and counselling service offered, staff can be referred by their manager, or they can self-refer in the knowledge this is private and confidential. We encourage staff to not wait for a crisis to refer; counselling can help with all kinds of concerns, including:

- Managing difficult feelings or situations – professional or personal.
- Advice on boundary setting and self-care.
- Getting the best out of your work relationships.
- Planning for or processing difficult conversations.

Stakeholder Voice

Listening to the voices of everyone in the Greenhead community is important for embedding a college-wide approach to mental health and well-being. We want to embody a culture known for listening to each other, where every individual in the college community matters.

Enabling a flow of communication and feedback helps foster open, trusting relationships where people feel their views are valued, they are known as individuals, and they feel they can have influence to make a difference.

Different channels are used for students, college staff and parents/carers, including:

Students

- M+P Week well-being surveys – "you said, we did".
- Regular one to one monitoring – subject and tutorial.
- Tutorial programme that encourages interaction.
- Tutor representatives / GCSA.

Staff

- M+P Week well-being survey.
- Staff focus groups.
- CPD meetings and regular catchups.
- Open-door policy.

Parents/Carers

- Direct contact and access to personal tutor – and Simon Lett.
- Parent/carer surveys.

We always communicate results and are transparent, in the most appropriate way. This may be via the Principal's Weekly Comm, email or INSET days. We will also always act on results/feedback.

Section 2: Mental Health and Well-being Framework

The *Mental Health and Well-being Framework* enables the college to demonstrate its commitment to well-being and creates a positive culture of mental and physical health which benefits the whole college community. It brings together all strands of support under one umbrella.

Framework Objectives

- The framework is led by the Senior Leadership Team and embedded into the *College Strategic Plan, College Departmental Quality Improvement Plans (*included in template), alongside day-to-day activities across the whole College.
- The framework addresses mental and physical well-being collectively, so that, at every level, we have a strategy that addresses the needs of the College community.
- To use the framework to visually demonstrate our commitment to mental health and well-being, at open events, the college website/prospectus and through social media the needs of the college community.
- To implement three dedicated M+P Weeks in the College calendar; offering an opportunity for staff and students to access activities, information sessions and resources on well-being.

The Framework Strands

The framework draws together seven key areas of well-being focus within the college:

- Leadership and Management
- SEND and Inclusion
- Pastoral and Welfare
- Sports and Enrichment
- Staff Well-being
- Teaching and Learning
- Parents and Carers

Behind each strand sits all the different things we offer, in relation to mental health and well-being. Please refer to the *Mental Health and Well-being Framework* for more detailed information.

Mental and Physical (M+P) Weeks

As a part of the *Mental Health and Well-being Framework*, three designated M+P Weeks are embedded into each academic year: one a term. Each week combines cross-college, out of class events and activities, with a teacher-led focus on mental health within curriculum.

Whilst M+P Weeks are an opportunity for staff and students to access activities/resources during dedicated weeks, they were also intended to:

- Highlight to students the importance placed upon well-being by the college and this extends to all aspects of college life.
- Explore with students the relationship between well-being and academic outcomes.
- To open a channel of communication between staff and students and allow a process of reflection on teaching/learning and the learner journey. This includes gathering feedback from both staff and students.
- Highlight to staff the importance placed upon their well-being by the senior leadership team, and to provide them with support to help them in all aspects of their role at the College.

Please refer to the *Mental Health and Well-being Framework* for more detailed information.

Capturing Feedback

As part of the M+P Week programme, students are asked to complete a short well-being survey for each subject and tutorials. The results are reviewed by each Department, Senior Leaders and the MHWP to inform and influence future adjustments – which are clearly communicated back to students. Feedback, for instance, helps inform the tutorial programme.

As part of the M+P Week programme, we will also run a staff well-being survey - developed by the Child Outcomes Research Consortium (CORC) and the Evidence Based Practice Unit (EBPU). This looks at staff well-being, the college's perceived attitude to staff well-being and asks questions about staff knowledge of young people's mental health. Results from each survey help prioritise areas for focus and action plans to be developed.

Section 3: SEND and Inclusion

Tiered Support

Three tiers of student support are available for students, and it is expected that students will move up and down these tiers throughout their time at college and depending on their changing needs.

What follows is a summary and please refer to the *SEND Policy* for detail. Other examples of interventions can be viewed in **Appendix C.**

Tier 1 – Universal

Available and offered to all students, regardless of their risk.

- Quality First Teaching (QFT) – High *quality and inclusive teaching for all; supporting students with a special educational need or disability (SEND) is the responsibility of the whole College and requires a collaborative approach.*
- Personal Tutor
- Careers Support
- Transition Support
- Enrichment Programme
- Work shadowing and Project Week
- Tutorial Programme – Includes Mental Health-focused A1 and A2 sessions.
- Counselling – self-referral
- CBT Therapy – self-referral
- Life-coaching – self-referral
- Library – Self-help books
- Well-being Moodle page

Tier 2 – Targeted Provision

Selective interventions that are targeted to groups as having increased needs or risk. Support is signposted and/or organised by Personal Tutors, or student and parents/carers.

- Coffee Club (Nurture Group)
- Exam Anxiety Sessions
- Meditation Classes
- Learning Mentor
- Study Centre (Safe Base)
- College Sports Maker – Healthy Body/Healthy Mind Programme
- Variety of Workshops e.g., Better sleep, Understanding panic and Let's talk life.

Tier 3 – Specialist Provision

Interventions / referrals for students at increased risk; suggested / organised by Personal Tutors, a Safeguarding DSL, or the Director of SEND and Inclusion.

- The MoodMaster Programme
- College Counselling
- Exam Access Arrangements

- Children Adolescent Mental Health Service (CAMHS)
- Children Emotional Well-being Services (CHEWS)
- Designated Safeguarding Lead
- Other Appropriate External Services
- Online Apps are also available

College Counselling Service

Greenhead College has had an in-house counselling service for over twenty years. As the counselling team has a unique understanding of the rhythms and pressures of college life, students are offered support and access that is best tailored to their individual needs. The team offers a counselling service and, more recently, life coaching and Cognitive Behavioural Therapy (CBT) support.

The aim of the counselling service is to provide confidential one to one support for students and respond to their individual needs - on a short, or longer-term, basis. Students self-refer and are seen on a "first come, first served basis". A waiting list is managed by the Lead Counsellor.

How to access the Counselling Service and further information can be found in **Appendix A.**

Additional Learning Support (ALS)

The aim of the ALS team is to create a positive and inclusive atmosphere where there is a shared commitment to value diversity, empower students and facilitate successful progression. Students can contact the ALS team directly or speak to their Personal Tutor to arrange an appointment.

Support available is signposted, in a group setting, through the tutorial programme and, individually, during the monitoring process. Where appropriate, support is also promoted on the Moodle Well-being pages and on posters and noticeboards in college.

Whenever we highlight support, we increase the chance of students seeking help by ensuring students understand: What help is available, who it is aimed at, how to access it, why to access it and What is likely to happen next.

Refer to the *SEND Policy* for more information about our commitment to the *SEND Code of Practice* and its recommendation of a 4-part cycle model (Assess, Plan, Do, Review).

Section 4: Guidance for College Staff

Signposting

Any member of staff who is concerned about the mental health or well-being of a student should speak to the student's Personal Tutor in the first instance.

If there is a fear that the student is in danger of immediate harm, then a direct referral to a Safeguarding DSL is appropriate.

If the student presents a medical emergency, then the normal procedures for medical emergencies should be followed, including alerting a first aider and contacting the emergency service if necessary.

Any concerns about a student's well-being should be recorded on CPOMS, guidance on how to do this is provided in **Appendix B.**

Where a referral to CAMHS is appropriate, and with the student's permission, this will be led and managed by the student's Personal Tutor or a Safeguarding DSL.

Students can also self-refer to the college counsellors by following the links on the counselling page on the college Moodle or completing a form - which are available at reception.

Recognising warning signs

College staff may become aware of warning signs which indicate a student is experiencing mental health or well-being issues. Warning signs should be taken seriously and staff observing any should communicate concerns with the student's Personal Tutor, or a Safeguarding DSL. They may include:

- Physical signs of harm that are repeated or appear non-accidental.
- Increased isolation from friends or becoming socially withdrawn.
- Changes in activity and mood.
- Lowering of academic achievement.
- Abusing drugs or alcohol.
- Talking or joking about self-harm or suicide.
- Expressing feelings of failure, uselessness, loss of hope or worthlessness.
- Secretive behaviour.
- Lateness or absence from college.
- Repeated physical pain or nausea with no evident cause.
- Insomnia, fatigue, or trouble concentrating.

Managing new 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 mental health, or that of a friend, to a member of staff, the member of staff's response should be calm, supportive, and non-judgmental. Staff listen, rather than advise, and the first thought is of the student's emotional and physical safety.

For more information about how to handle mental health disclosures sensitively see:

Appendix D: *'Talking to students when they make mental health disclosures* and
Appendix E: *'A short guide to having tricky conversations*.

All safeguarding disclosures should be reported to the Safeguarding Officer or a member of the Safeguarding Team and recorded as soon as possible on the Child Protection Online Monitoring System (CPOMS)

If you have a general concern, then contact the student's Personal Tutor.

Confidentiality

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

- who we are going to talk to,
- what we are going to tell them,
- why we need to tell them.

It is always advisable to share disclosures with a Safeguarding DSL. This also helps safeguard a staff member's own emotional well-being as they are no longer solely responsible for the student and ensures continuity of care in any absences etc. – and an extra source of input/support.

Supporting Peers

When a student is suffering from mental health and well-being difficulties, they may share with friends, which can be difficult for their friends. To help keep peers safe, we will highlight the following:

- 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.

Section 5: Working with Parents and Carers

Working with parents/carers of students with Social, Emotional and Mental Health difficulties

Where it is deemed appropriate to inform parents/carers, we need to be sensitive in our approach. It can be shocking and upsetting for parents to learn of their child's difficulties, and some may respond with anger, fear, or upset during the first conversation. We should be accepting of this (within reason) and give the parent time to reflect.

We should always highlight further sources of information; including support aimed specifically at parents e.g., helplines and forums. Please refer to the Parents and Carers section on the website which includes regularly updated information.

Parents are often very welcoming of support and information from the college about supporting their child's emotional and mental health.

Supporting parents/carers

To support parents/carers, we will:

- Highlight sources of information and support on our college website.
- Ensure all parents are aware of who to talk to in college.
- Make sure our *Mental Health and Well-being Policy*, along with *Mental Health and Well-being Intent Statement*, is easily accessible to parents and carers.
- Share ideas about how parents can support positive mental health in their son/daughter through regular information evenings and newsletters.

APPENDIX A: Greenhead College Counselling

The aims of counselling are to support students that may be struggling by:

- Exploring difficult personal issues in a confidential (with limits) relationship.
- Understanding, processing and validating feelings and experiences, "I was believed".
- Supporting retention and ability to engage with academic life.
- Empowering to find solutions that work for individuals.
- Offering emotional containment and building emotional resilience.
- Developing coping strategies and resources to deal with difficulties more effectively.
- Gaining new perspectives and insights into self.
- Reconnecting with hope.
- Reducing distress.
- Reducing isolation.
- Providing a place of safety.
- Developing life skills, confidence, and self-esteem.

Although counselling is not an "emergency service", in the context of working in college, there are occasions in which the counsellors can use their skills to assist the staff to respond in this type of situation. This does not replace the role of the 'Safeguarding DSL' who deals with child protection in college; rather they can offer support and expertise. If a member of staff has an immediate high-risk concern about a student, a Safeguarding DSL is to be contacted in the first instance.

Counsellors are also able to support staff in developing well-being initiatives, confidentiality dilemmas, safeguarding, staff counselling and guidance on supporting their students safely.

Referring for counselling

Counselling works best when it is voluntary, and the counselling team accepts self-referral only. Members of staff do not complete a referral form on behalf of a student, or force them to refer, but may consider suggesting counselling to a student as an option in a one-to-one session with a tutor. For instance, "Do you know we have counsellors in college?", "Have you thought about talking it through with a counsellor?". This gives students a chance to thinking it through and allows them to self-refer. Staff can offer to support students in completing the form if they feel that would help.

Referral process for counselling support

- Appointment request form can be given in at reception, by hand to M30 or using online form on Moodle. On this form, students provide their availability for appointments. *A student may wait longer if they have very limited availability and/or rejects first appointment offered in favour of waiting for a preferred timeslot.*
- Student will receive a response from the Lead Counsellor within a few days of receiving request.
- Student will be offered an appointment (by email or email with text alert as requested).
- If there is a waiting list, information about that and an extensive list of sources of support are sent to the student whilst waiting. When a time becomes available to match availability provided, an appointment is then offered.
- When appointments are offered, students must confirm their attendance by a date given. Without confirmation, the appointment is reallocated to another student on the wait list.
- Student attends counselling appointment.

APPENDIX B: Using CPOMS

O CPOMS Go to the VLE and to college links on the bar at the top. Click on this and then on CPOMS to open the resource.

Add your college email address to the space indicated. The first time you use this you will need to click on **Forgotten your password or using CPOMS for the first time?** Below login. A long-coded password will be sent via email. Carefully copy this into the password section of the CPOMS login page. You will be able to reset the password as you choose.

When you have logged in the next page will say **Login without Two Factor Authentication** in bold. Click on this and you will see the **alerts section**. If you have been sent any alerts you will get an email to tell you and a link to the login page for CPOMS so you can access them. Click on incident to view it. Once you have read it you can mark it as read to acknowledge that you have seen the incident. Once you have done this the alert will disappear and you will not be able to read it again so if you are required to add any actions make sure you do this before selecting 'mark as read'.

Adding an Incident Click on Add Incident.

- **Select the student you want to add the incident for** by beginning to type the name into the student box at the top of the page. It will filter through all names on the system. Select the name required and the box will turn grey. If you have selected the wrong name delete it and select an alternative.
- **Fill in the incident box;** be accurate and specific, once the incident has been submitted you cannot delete it.
- **Select at least one category to assign it to.** You can also link other students if more than one student is involved in the incident.
- **You can then select a time and date** for when the incident happened otherwise it will default to the current time and date.
- Please make sure you click on **Safeguarding,** so all the Safeguarding Co-ordinators are alerted. Type in the names of any other members of **staff you wish to alert** (Note **other** will alert **all** 200+staff).
- Using the browse button, you can **upload any documents** as you would for an email.
- Lastly add any **agency** names involved such as CAMHS, Police or Kirklees Safeguarding Board.
- Finally select **Add Incident** button and submit.

After adding an incident, please record on Cedar that there is information on CPOMS by using a confidential information thread in the student's pastoral log.

N.B. If you have made a significant mistake, take note of the incident ID and pass this on to one of the Safeguarding Team.

APPENDIX C: Workshops or One-to-One Interventions

There are different interventions available. Some examples are found below.

There are also many enrichment activities that are used for relaxation which are available to all students as an integral part of their programme of study.

- Coffee Club (Nurture group)
- Meditation (Quieten your mind and find your inner calm)
- Learning Mentor (Timetabled sessions)
- Structured lunch/break time activities
- Let's talk life group (Sessions exploring how to deal with a variety of social scenarios)
- Study Centre safe base
- Preparation for Adulthood sessions. (Supported H.E. visits and transition work)
- LGBT (We are a confidential group of LGBTUQ (lesbian, gay, bisexual, transgender, unsure minded friends who like to socialise!)
- Classroom Chair to 5k and beyond (if you are you looking to improve your fitness and relieve any stress then this is the activity for you) Enrichment Activity
- Fitness Room (Female only fitness room session. Come along and get fit in a fun and friendly environment. All abilities welcome) Enrichment Activity
- Practical Relaxation Techniques (muscular relaxing exercises and deep breathing exercises) Enrichment Activity)
- Healthy Body, Healthy Mind. – Physical activity referral programme, students complete 6 weeks of physical activity or sport, which can be 1:1 or in a group setting.

Example of activities available September 2023

APPENDIX D: Talking to students when they make mental health disclosures.

The advice below is from students themselves, in their own words, together with some additional ideas to help you in initial conversations with students when they disclose mental health concerns.

Focus on listening.
"She listened, and I mean REALLY listened. She didn't interrupt me or ask me to explain myself or anything, she just let me talk and talk and talk. I had been unsure about talking to anyone, but I knew quite quickly that I'd chosen the right person to talk to and that it would be a turning point."

If a student comes to you, it's because they trust you and feel a need to share their difficulties with someone. Let them talk. Ask occasional open questions to encourage them to keep exploring their feelings and open-up. Just letting them pour out what they're thinking can make a big difference and is a big first step. It may be the first time they have admitted there is a problem, even to themselves.

Don't talk too much.
"Sometimes it's hard to explain what's going on in my head – it doesn't make a lot of sense and I've kind of gotten used to keeping myself to myself. But just 'cos I'm struggling to find the right words doesn't mean you should help me. Just keep quiet, I'll get there in the end."

The student should be talking at least three quarters of the time. If that's not the case, you need to redress the balance. You are here to listen, not to talk. Sometimes the conversation may lapse into silence. Try not to give into the urge to fill the gap; rather wait until the student does so. This often leads to them exploring their feelings more deeply. Of course, you can interject occasionally, perhaps with questions to explore certain topics they've touched on more deeply, or to show you understand and are supportive. Don't feel an urge to over-analyse the situation or try to offer answers. This all comes later. For now, your role is simply one of supportive listener. So, make sure you're listening!

Don't pretend to understand.
"I think that all teachers got taught on some course somewhere to say 'I understand how that must feel' the moment you open-up. YOU DON'T – don't even pretend to, it's not helpful, it's insulting."

The concept of a mental health difficulty such as an eating disorder or obsessive-compulsive disorder (OCD) can seem alien if you've never experienced these difficulties first hand. You may find yourself wondering why on earth someone would be doing something to themselves, but don't explore those feelings with the sufferer. Instead listen hard to what they're saying and encourage them to talk, and you'll slowly start to understand what steps they might be ready to take to start making some changes. Be mindful of what you are saying as it is very easy to say things in autopilot mode, but don't worry too much about saying the wrong thing, the fact that you are taking time to listen to the student is more important.

Don't be afraid to make eye contact.
"She was so disgusted by what I told her that she couldn't bear to look at me."

It's important to try to maintain a natural level of eye contact. If you make too much eye contact, the student may interpret this as you are staring at them. They may think that you are horrified about what they are saying or think they are a 'freak'. On the other hand, if you don't make eye contact a student may interpret this as you are feeling disgusted by them – to the extent that you can't bring yourself to look at them. To convey a positive message to the student, try to maintain natural eye contact.

Offer support.

"I was worried how she'd react, but my Mum just listened then said, 'How can I support you?' – no one had asked me that before and it made me realise that she cared. Between us we thought of some practical things she could do to help me stop self-harming."

Never leave this kind of conversation without agreeing next steps. These will be informed by your conversations with appropriate colleagues and college policies on issues. Whatever happens, you should have some form of next steps to carry out after the conversation because this will help the student to realise that you're working with them to move things forward.

Acknowledge how hard it is to discuss these issues.

"Talking about my bingeing for the first time was the hardest thing I ever did. When I was done talking, my teacher looked me in the eye and said, 'That must have been really tough' – he was right, it was, but it meant so much that he realised what a big deal it was for me."

It can take a young person a long time to admit they have a problem to themselves, let alone share that. If a student chooses to confide in you, you should feel privileged they place such trust in you. Acknowledging both how brave they have been, and how glad you are they chose to speak to you, conveys positive messages of support to the student.

Don't assume that an apparently negative response is a <u>negative</u> response.

"The anorexic voice in my head was telling me to push help away so I was saying no. But a tiny part of me wanted to be better. I just couldn't say it out loud or I'd have to punish myself."

Even though a student has confided in you and may even have expressed a desire to get better, it doesn't mean they'll readily accept help. Don't be offended or upset if your offers of help are met with anger, indifference, or insolence, it's the illness talking, not the student.

Never break your promises.

"You must do whatever you say you'll do, or else the trust we've built in you will be smashed to smithereens. And never lie. Just be honest. If you're going to tell someone, just be upfront about it, we can handle that, what we can't handle is having our trust broken."

A student wants to know they can trust you. So, if they want you to keep their issues confidential and you can't, you must be honest. You can be honest and say you don't have all the answers, or aren't exactly sure what will happen next, but explain only those who need to know to help will know. Consider yourself the student's ally rather than their saviour and think about which next steps you can take together, always ensuring you follow relevant policies and consult appropriate colleagues.

APPENDIX E: A short guide to having tricky conversations.

The fact a student has chosen to open-up to you is very positive and giving them 'permission' to talk without judgement can be incredibly powerful. It can be a tremendous relief to talk and so it is crucial not to avoid these tricky conversations.

LISTENING.

Try to listen effectively e.g., open body language, putting aside distractions, (a good quality 10 minutes is better than 30 with interruptions/distractions) switching off your own beliefs and values, avoiding formulating an answer so that you are not really hearing what is being said.

Be mindful that you do not necessarily need to solve or 'fix' the student's problems.

Question gently and effectively:

Start with the how, what, where questions which will generate conversation, but which are not as challenging as the why?

Open-ended questions typically begin with words such as "How", or phrases such as "Tell me about...". Often, they are not technically a question, but a statement which offers the opportunity to say more than just yes or no.

- How are you?
- How have you been feeling?
- What happened?
- Where were you when...?
- How did you feel when...?
- How would you…?
- What do you think about…?

The following phrases may also be useful and will show that you are really listening:

- Tell me a little more about….
- Help me to understand. So, you are saying……
- Have I got this right? You said that….

Try to avoid using "why?" questions. A 'Why' question is instantly challenging and almost expects a solution that a young person may struggle to see in the moment.

If someone is struggling to 'say it' - writing it down can sometimes be easier.

A good experience of being listened to makes the student more likely to ask for help in the future.

SUICIDAL THOUGHTS AND SELF-HARM.

If you are worried that a student may have suicidal thoughts, it is OK to ask them about this. Asking about suicidal feelings does not encourage them to act. That said, it is fine to know your limits.

Just listening can be very powerful and be aware that sometimes asking too many searching questions about deeper emotional meanings may get you out of your depth. The important thing is to know how to make a 'good referral' to the college safeguarding team, counsellors, and outside agencies.

If a student discloses that they have been self-harming, it is not necessary to see the cuts/burns but do ask if they need medical attention. Do not try to get them to simply stop. Self-harming is a coping strategy. If you take that away, they may have nothing else.

MAKING REFERRALS / RECORDING CONVERSATIONS.

If you are sufficiently worried to make a safeguarding referral, you MUST let the student know you are going to do this. Likewise, if you are going to record anything sensitive on CEDAR, you MUST share this with the student. Not doing so risks them finding out and you having broken trust. They will then be much less likely to come to you for help again.

COLLEGE COUNSELLORS.

If you want them to refer to the college counsellors, you could say:

- Had you thought about chatting with a counsellor?
- Are you aware that we have counsellors at college?
- You have talked to me; how would it be to talk to a counsellor?

If they agree, it is fine to walk up with them to say hello to a counsellor (if anyone is available, please ring and check first). This can break the ice and make the student more likely to access counselling.

It is fine to fill an appointment form in **with** them, but not **for** them. If they are not immediately interested, give them a form, and let them think about it.

Finally, tricky conversations can be stressful. Look after yourself and seek support from colleagues. You can also access counselling support yourself!