

The Bridge School

Wellbeing and Mental Health Policy



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Reviewed by: LGB

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Policy Statement

The Bridge is a school for students with Social Emotional Mental Health (SEMH) issues, who are experiencing difficulty accessing a mainstream school. Promoting positive mental, emotional and physical wellbeing of all our students and staff is at the forefront of everything we do. We recognise and respond to the individual needs of all our students, and to the negative influences, which affect their daily lives and their ability to engage in school and cope with day to day life.

We fully understand that everyone experiences life challenges that can make us vulnerable and at times, anyone may need additional emotional support. We take the view that positive mental health is everybody's business and that we all have a role to play.

We have a supportive, nurturing and caring ethos, and our approach is respectful and kind, where each individual and contribution is valued.

This Policy aims to:

- Describe the school's approach to mental health issues
- Increase the understanding and awareness of mental health issues and mental health problems
- Empower staff working with young people with mental health issues
- Provide support and guidance to students and staff who suffer from mental health issues and their wellbeing, as well as their peers and parents and carers
- Provide support to all our staff dealing with highly vulnerable young people.

Roles and Responsibilities

The most important role school staff play is to familiarise themselves with the risk factors and warning signs of all students attending The Bridge, which is outlined on each individual students Personal Care Plan and the procedures the staff should adhere to following a concern

The Head of School is responsible for ensuring that the procedures outlined in this policy are followed on a day to day basis, and are fully understood by all staff members.

The school has a senior member of staff who was appointed as Head of Staff and Student Development and Welfare, and along with the Head of School, is responsible for all matters relating to child protection and welfare.

Toni Cox – Head of School is the Designated Safeguarding Lead

Maria Jackson – Head of Staff and Student Development and Welfare & Safeguarding Deputy

Any member of school staff concerned about the wellbeing of a student MUST speak to the Safeguarding Leads. All staff members are fully trained in relation to the school's child protection procedures, if they have a concern that a student is at risk of harm or significant risk of harm, then the school's child protection procedures should be followed accordingly.

In addition to the child protection measures outlined in the school's Safeguarding (Child Protection) policy, the school has a duty of care to protect and promote a child or young person's mental and emotional wellbeing.

Child Protection Responsibilities

The Bridge is committed to safeguarding and promoting the welfare of children and young people, including their mental health and wellbeing, and expects all staff and Governors to share this commitment. We recognise that children have a fundamental right to be protected from harm and that students cannot learn effectively unless they feel safe and secure. We therefore aim to provide a school environment which promotes self-confidence, a feeling of self-worth and the knowledge that students' concerns will be listened to and acted upon accordingly.

Every student should feel safe, be healthy, enjoy and achieve, make a positive contribution and achieve economic wellbeing. (Every Child Matters 2004 DfE).

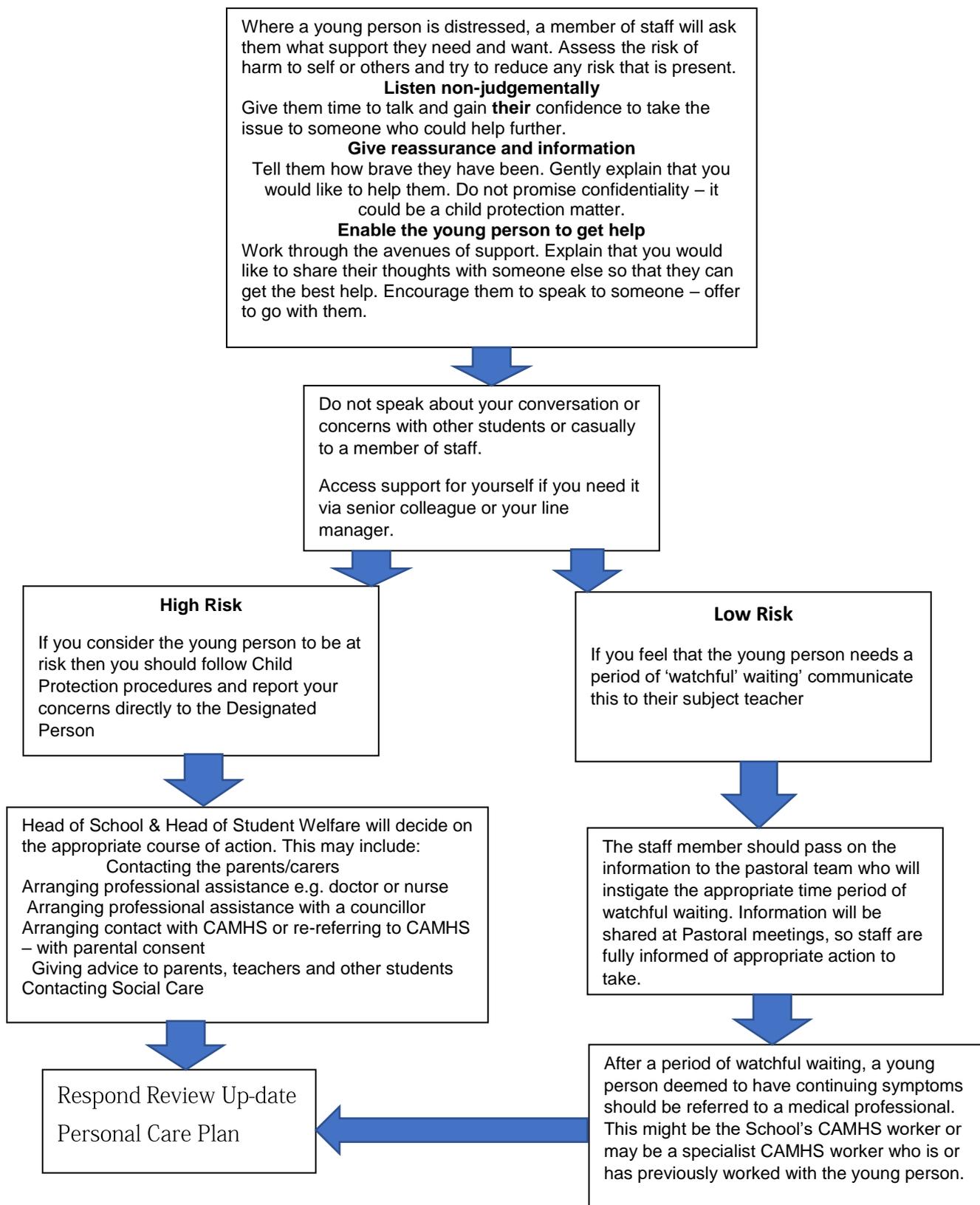
Staff Training

Staff training is tailored to the school's requirements and cohort. Regular training is delivered to staff from various organisations, covering a number of topics such as:

- Level 1 Safeguarding Training for all staff
- Safeguarding students attending The Bridge
- Self - Harm
- Having therapeutic conversations with young people (Margot Sunderland)
- Mental Health First Aid
- Suicide Awareness (Charlie Waller Memorial Trust)
- Suicide Prevention Training (Papyrus)
- Raising self-esteem and resilience among young people
- Supporting Teenagers with anxiety

Highly targeted staff training is an invaluable resource which supports and empowers staff who are dealing with highly vulnerable and emotional students.

Procedures following a concern

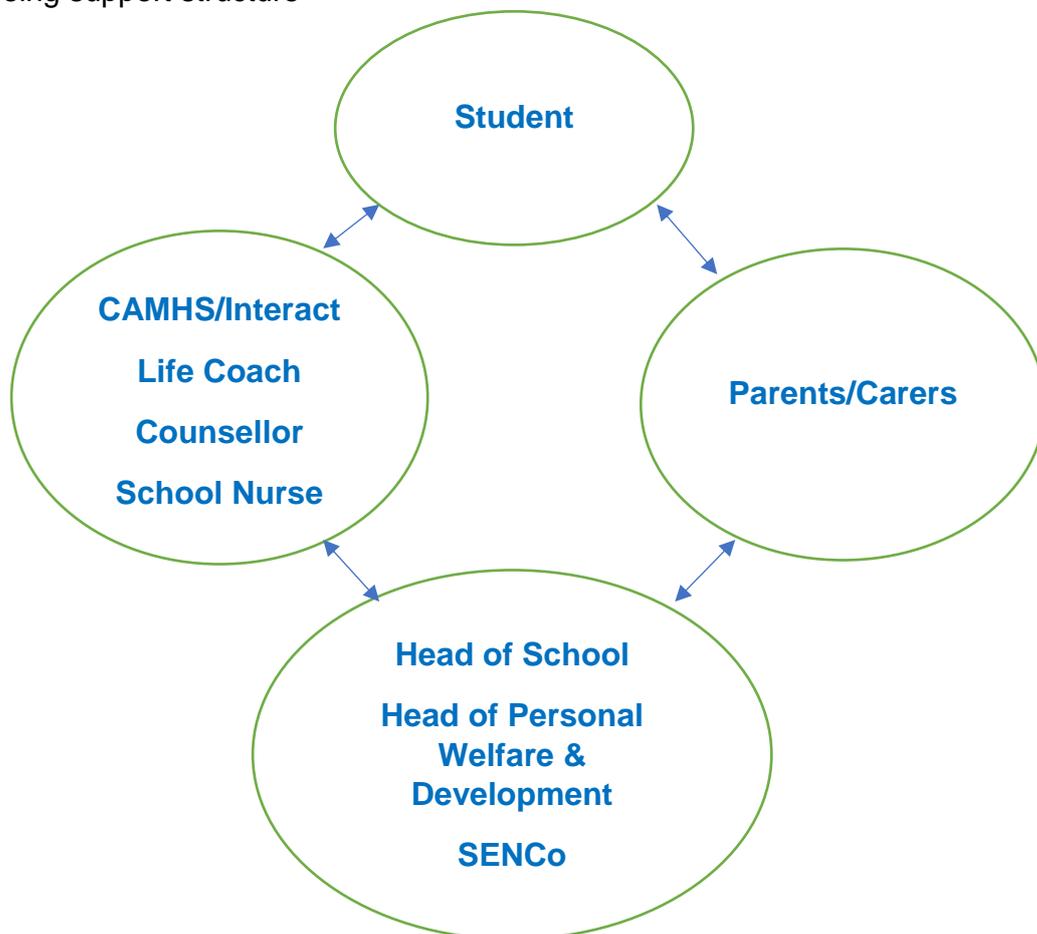


Wellbeing support structure

The school aims to implement the following support structure for all students when they arrive at The Bridge, Personal Care Plans (see appendix I) are created according to the need of the young person.

Following consultation between the Head of School and the wider team, a PCP would be agreed between the school, the student and the student's parent/carer, with the additional input from the medical team working with the individual student. This is made available to relevant teaching staff in order the school can provide the appropriate level of support for the student.

Wellbeing support structure



Wellbeing and The Bridge

The Bridge is the wellbeing provision, students are referred to the school, following a formal diagnosis from CAMHS and other mental health professionals.

The aim of the school is to re-engage students back into education, at a pace they feel confident they can cope with. Each student's initial timetabled offer is tailored, and considers their individual needs, following a number of meetings with the child and their family, together with all of the professionals working with the young person

Teaching at The Bridge

Due to the nature of our cohort, class sizes are limited to a maximum of 6 students, the environment is calm and all staff are mindful of the issues our students face. Therefore, the level of challenge is carefully monitored, as well as engagement in lesson. This approach allows students to work and thrive in an environment that they feel comfortable and ready to engage in.

The school's PSHCE Programme is fundamental to promoting the welfare of all students, and focuses on 10 key qualities which are essential to good mental health and wellbeing

- Appropriate sleep patterns
- Time for exercise
- Healthy eating habits
- Emotional resilience – accepting being “good enough”
- Firm boundaries
- Ability to form good relationships
- Ability to cope with and manage change and uncertainty
- To feel and express a range of negative and positive emotions
- A sense of perspective
- To understand financial planning

These qualities are embedded throughout the school, within the schools 6 principles which underpin the Unique Me:

- Knowing Myself
- Lifelong Learning
- Developing Healthy Habits
- Being Financially Aware
- Connecting to Others
- Finding a Fulfilling Future

These principles are key to delivering the school's mission statement that all students will leave The Bridge with Hope and a Future. They also play a vital role supporting students to become confident, resilient young adult learners as well as preparing them for their future life journey.

The School's Enrichment Programme

The Enrichment Programme is integral to the school curriculum and timetabled accordingly.

These programmes of activities aim to:

- Build students social skills in a calm and relaxed atmosphere
- Increase participation in outdoor activities that are considered therapeutic and calming
- Encourage students to become confident, by taking ownership of their ideas and creations
- Teaching students, the importance of environmental issues
- Teaching students entrepreneurial skills

Environmental Projects

Through the School Council, The Bridge aims to give students a voice and a sense of responsibility to pursue their proposals.

Students at The Bridge are encouraged to think about the environment and how best they can make a positive contribution to local, national and world issues.

These projects are designed to give our students a sense of purpose. The school has embarked upon a number of different initiatives which have:

- Given our students a sense of pride and achievement
- Built confidence in their own ability to “make things happen”
- Given students a greater sense of self-worth
- Improved communication skills among their peers
- Fostered relationships between students and the staff.

Garden Project

Students have designed and created a school garden, where they continue to tend to the plants, trees, herbs and vegetables. The produce grown is used in recipes in food Technology lessons. More importantly, gardening activities help improve:

- Physical health of our students
- Emotional wellbeing through relaxation and stress relief
- Is a natural stress reliever
- Encourage and promote outdoor activity

Wellbeing Workshops

The delivery of bespoke workshops is integral to the school's curriculum. The workshops address the mental health issues and challenges our young people face, with the aim of providing them with strategies and the tools to overcome the issues they are facing.

Students and staff take part, to ensure the school fully embeds a culture of wellbeing across the entire school, while at the same time, building staff awareness in best practice approaches to our school and mental health issues.

These workshops focus on various topics, which the school identifies at the time as an area of greatest need, for example;

- Building Emotional Resilience
- Sleep and Wellbeing
- Managing Stress
- Coping with Anxiety
- Positive thinking
- Healthy Relationships
- Exam Stress

Life Trust Farm

The Bridge is part of LIFE Education Trust, and has access to a LIFE School Farm. It is well documented, that animals have mood boosting benefits. Small animals can help reduce stress, anxiety and depression. Animals also help young people to regulate their emotions.

When students visit the farm, the benefits are:

- Working in the open air without the pressures of academic challenges
- Enhances and supports the school's curriculum, in Science and Art.
- Encourages team building and communication skills
- Supports physical activity
- Supports the ASDAN Small Animal Care Qualification offered to some of our KS4 students

Mindfulness

The school facilitates whole school mindfulness sessions, and encourages all staff and students to participate.

Why Mindfulness?

Mindfulness sessions allows the individual to focus on being intensely aware of what they are sensing and feeling in the moment, without interpretation or judgement.

Mindfulness can:

- Help relieve stress
- Improve sleep
- Lower anxiety levels
- Improve emotional regulation

Life Coaching

The school has a dedicated Life Coach who works at The Bridge twice a week, all students have access to this service. For the school's most vulnerable students, sessions with these services will form part of the student's timetable.

The role of the Life Coach is to help our young people make progress in their lives, in order to attain greater fulfilment. The work involves supporting our young people to gradually and repeatedly go into feared situations, until they feel less anxious. For example; attending school, or participating in class discussions. So, after a period of time, the young person's anxiety will naturally lessen.

At The Bridge, we actively promote facing your fear if you can. We believe with the school's support our young people will face those situations that scare them. If not, then they will miss the chance to do the things they want to or need to. They will become "stuck". The school's mantra is one of positivity of "Face your fear, and do it anyway".

School Counsellor

All students who start at The Bridge are under the care of CAMHS, or other mental health professionals. It is not appropriate for students to have counselling from two different services. However, the school's counsellor works very closely with CAMHS, and is often called upon and utilised during periods of difficulty and non-engagement with CAMHS of our young people. In the event the school counsellor is asked to become involved with one of our students, parental consent is sought by the school, if the student is under the age of 13.

Recording and Sharing of information

When students are referred to The Bridge, permission will be sought from the parent/carer by the Head of School for permission to share information and to contact their son/daughter's medical team. This will help the school identify any potential risk factors, as well as providing valuable insight into the young person's difficulties. Details will be logged on the school's safeguarding file.

Lesson Monitor

Staff record engagement in lessons for all students they teach on a day to day basis, as a tool to monitor any change in behaviour, and presentation. The register of engagement is reviewed by staff on a regular basis, any concerns are raised with the student's key worker, Head of School or Head of Student Welfare.

Social Emotional Profile Tracker (SEPT)

In addition to the students' academic starting point, the school explores the young person's emotional wellbeing through the school's Social Emotional Profile Tracker (SEPT) See Appendix II. This is completed by the young person, the parent, and after a period of time, by the subject teacher who has been working with the student. The SEPT will track the scores and responses to specific questions, from resilience levels, self-esteem, feeling safe, engagement in extracurricular activities and confidence levels. The SEPT is regularly visited by staff, and those students who score below the set threshold have a dedicated member of staff to work with them, setting academic and personal targets, as well as providing the appropriate support to help improve the young person's emotional wellbeing. The SEPT are carried out every term.

Pastoral Meetings

All staff are required to attend weekly pastoral meetings to discuss individual students and share relevant information. Any areas of concern are acted upon accordingly, and within a timely manner. All meetings are recorded and minutes are stored electronically on the staff shared area.

The Bridge recognises that to support our students' mental health and wellbeing, the school must also support parents through this difficult time. This support consists of:

- Regular communication informing parents of the support about mental health and emotional wellbeing, and where to access relevant services.
- We ensure that all parents are aware of who to talk to, and how to go about this, if they have concerns about their child
- A sharing of ideas about how parents can support positive mental health in their children, through dedicated workshops held at the school
- Allowing parents to access additional sources of further support working with the school's Family Practitioner and Life Coach
- Parents are regularly informed about the mental health topics their children are learning in PSHCE, and we encourage parents to share ideas for extending and exploring this learning at home.
- Our Wellbeing and Mental Health policy being freely available

Working in Partnership

The Bridge works closely with other professional partners and agencies

As part of our targeted provision the school will work with other agencies to support children's emotional health and wellbeing including:

- CAMHS (Child Adolescent Mental Health Services)
- Educational Psychologists
- Counselling Services
- Family Support Workers
- Interact
- Social Care
- Therapists
- School Nurse
- Paediatricians

Supporting Staff

All staff have access to the school counsellor. These sessions are funded by The Bridge. Staff are encouraged to discuss workload, their role within the school, as well as any concerns they may have regarding the emotional toll dealing with vulnerable students can have on their own wellbeing.

Awareness of mental health issues and signs staff should be looking for

Anxiety and Depression

Anxiety disorders

Anxiety is a natural, normal feeling we all experience from time to time. It can vary in severity from mild uneasiness through to a terrifying panic attack. It can vary in how long it lasts, from a few moments to many years.

All children and young people get anxious at times; this is a normal part of their development as they grow up and develop their 'survival skills' so they can face challenges in the wider world. In addition, we all have different levels of stress we can cope with - some people are just naturally more anxious than others, and are quicker to get stressed or worried.

Concerns are raised when anxiety is getting in the way of a child's day to day life, slowing down their development, or having a significant effect on their schooling or relationships. It is estimated that 1 in 6 people will suffer from General Anxiety Disorder at some point in their lives.

Anxiety disorders include:

- 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)
- Symptoms of an anxiety disorder
- These can include:

Physical effects

- Cardiovascular – palpitations, chest pain, rapid, heartbeat, flushing
- Respiratory – hyperventilation, shortness of breath
- Neurological – dizziness, headache, sweating, tingling and numbness
- Gastrointestinal – choking, dry mouth, nausea, vomiting, diarrhoea
- Musculoskeletal – muscle aches and pains, restlessness, tremor and shaking

Psychological effects

- Unrealistic and/or excessive fear and worry (about past or future events)
 - Mind racing or going blank
 - Decreased concentration and memory
 - Difficulty making decisions
 - Irritability, impatience, anger
 - Confusion
 - Restlessness or feeling on edge, nervousness
 - Tiredness, sleep disturbances, vivid dreams
 - Unwanted unpleasant repetitive thoughts
- ### Behavioural effects
- Avoidance of situations
 - Repetitive compulsive behaviour e.g. excessive checking
 - Distress in social situations
 - Urges to escape situations that cause discomfort (phobic behaviour)

How to help a pupil having a panic attack

- If you are at all unsure whether the pupil is having a panic attack, a heart attack or an asthma attack, and/or the person is in distress, call an ambulance straight away.
- If you are sure that the pupil is having a panic attack, move them to a quiet safe place if possible.
- Help to calm the pupil by encouraging slow, relaxed breathing in unison with your own. Encourage them to breathe in and hold for 3 seconds and then breathe out for 3 seconds
- Be a good listener, without judging.
- Explain to the pupil that they are experiencing a panic attack and not something life threatening such as a heart attack.
- Explain that the attack will soon stop and that they will recover fully.
- Assure the pupil that someone will stay with them and keep them safe until the attack stops.
-

Many young people with anxiety problems do not fit neatly into a particular type of anxiety disorder. It is common for people to have some features of several anxiety disorders. A high level of anxiety over a long period will often lead to depression and long periods of depression can provide symptoms of anxiety. Many young people have a mixture of symptoms of anxiety and depression as a result.

Depression

A clinical depression is one that lasts for at least 2 weeks, affects behaviour and has physical, emotional and cognitive effects. It interferes with the ability to study, work and have satisfying relationships. Depression is a common but serious illness and can be recurrent. In England it affects at least 5% of teenagers, although some estimates are higher. Rates of depression are higher in girls than in boys. Depression in young people often occurs with other mental disorders, and recognition and diagnosis of the disorder may be more difficult in children because the way symptoms are expressed varies with the developmental age of the individual. In addition to this, stigma associated with mental illness may obscure diagnosis.

Risk Factors

- 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

Some people will develop depression in a distressing situation, whereas others in the same situation will not

Symptoms

Effects on emotion: sadness, anxiety, guilt, anger, mood swings, lack of emotional responsiveness, helplessness, hopelessness
Effects on thinking: frequent self-criticism, self-blame, worry, pessimism, impaired memory and concentration, indecisiveness and confusion, tendency to believe others see you in a negative light, thoughts of death or suicide
Effects on behaviour: crying spells, withdrawal from others, neglect of responsibilities, loss of interest in personal appearance, loss of motivation. Engaging in risk taking behaviours such as self-harm, misuse of alcohol and other substances, risk-taking sexual behaviour. Physical effects: chronic fatigue, lack of energy, sleeping too much or too little, overeating or loss of appetite, constipation, weight loss or gain, irregular menstrual cycle, unexplained aches and pains.

The most important role school staff can play is to familiarise themselves with the risk factors and warning signs outlined above and to make the Head of School (designated teacher for safeguarding children) or the deputy Safeguarding Lead aware of any child causing concern.

Following the report, the Safeguarding Leads will decide on the appropriate course of action. This may include:

- Contacting parents/carers
- Arranging professional assistance e.g. doctor, nurse
- Arranging an appointment with a counsellor
- Arranging a referral to CAMHS or contacting the allocated CAMHS Worker or private referral – with parental consent
- Giving advice to parents, teachers and other students

Students may choose to confide in a member of school staff if they are concerned about their own welfare, or that of a peer. Students need to be made aware that it may not be possible for staff to offer complete confidentiality. If you consider a pupil is at serious risk of causing themselves harm then confidentiality cannot be kept. It is important not to make promises of confidentiality that cannot be kept even if a student puts pressure on you to do so.

Eating Disorders

Definition of Eating Disorders Anyone can get an eating disorder regardless of their age, gender or cultural background. People with eating disorders are preoccupied with food and/or their weight and body shape, and are usually highly dissatisfied with their

appearance. The majority of eating disorders involve low self-esteem, shame, secrecy and denial.

Anorexia nervosa and bulimia nervosa are the major eating disorders. People with anorexia live at a low body weight, beyond the point of slimness and in an endless pursuit of thinness by restricting what they eat and sometimes compulsively over-exercising. In contrast, people with bulimia have intense cravings for food, secretly overeat and then purge to prevent weight gain (by vomiting or use of laxatives, for example).

Risk Factors

The following risk factors, particularly in combination, may make a young person more vulnerable to developing an eating disorder:

Individual Factors

- 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 or over-controlling home environment
- Poor parental relationships and arguments
- Neglect or physical, sexual or emotional abuse
- Overly high family expectations of achievement

Social Factors

- Being bullied, teased or ridiculed due to weight or appearance
- Pressure to maintain a high level of fitness/low body weight for e.g. sport or dancing

Warning Signs

School staff may become aware of warning signs which indicate a student is experiencing difficulties that may lead to an eating disorder. These warning signs should always be taken seriously and staff observing any of these warning signs should seek further advice from one of the designated teachers for safeguarding children or from the medical centre.

Physical Signs

- Weight loss
- Dizziness, tiredness, fainting
- Feeling Cold
- Hair becomes dull or lifeless
- Swollen cheeks
- Callused knuckles
- Tension headaches
- Sore throats / mouth ulcers
- Tooth decay

Behavioural Signs

- Restricted eating
- Skipping meals
- Scheduling activities during lunch

- Strange behaviour around food
- Wearing baggy clothes
- Wearing several layers of clothing
- Excessive chewing of gum/drinking of water
- Increased conscientiousness
- Increasing isolation / loss of friends
- Believes they are fat when they are not
- Secretive behaviour
- Visits the toilet immediately after meals
- Excessive exercise

Psychological Sign

- Preoccupation with food
- Sensitivity about eating
- Denial of hunger despite lack of food
- Feeling distressed or guilty after eating
- Self-dislike
- Fear of gaining weight
- Moodiness
- Excessive perfectionism

Staff Roles The most important role school staff can play is to familiarise themselves with the risk factors and warning signs outlined above and to make the Safeguarding leads aware of any child causing concern.

Following the report, the Safeguarding Lead will decide on the appropriate course of action. This may include:

- Contacting parents/carers
- Arranging professional assistance e.g. doctor, nurse
- Arranging an appointment with a counsellor
- Arranging a referral to CAMHS or private referral – with parental consent
- Giving advice to parents, teachers and other pupils

The Safeguarding Lead will ask the medical centre to weigh the pupil and to monitor their weight on a regular basis. Parents will be consulted once the student has been weighed regardless of whether the weight gives cause for concern. Students may choose to confide in a member of school staff if they are concerned about their own welfare or that of a peer. Students need to be made aware that it may not be possible for staff to offer complete confidentiality. If you consider a student is at serious risk of causing themselves harm then confidentiality cannot be kept. It is important not to make promises of confidentiality that cannot be kept even if a student puts pressure on you to do so.

Management of eating disorders in school exercise and activity – PE and games Taking part in sports, games and activities is an essential part of school life for all students. Excessive exercise, however, can be a behavioural sign of an eating disorder. If the Head of School and advice from a medical team deem it appropriate they may liaise with PE staff to monitor the amount of exercise the student is doing in school. They may also request that the PE staff advise parents of a sensible exercise programme for out of school hours. All teachers at the School will be made aware of which students have a known eating disorder.

The School will not discriminate against pupils with an eating disorder and will enable them whenever appropriate, to be involved in sports. Advice will be taken from medical professionals, however, and the amount and type of exercise will be closely monitored.

When a student is falling behind in lessons

If a student is missing a lot of time at school or is always tired because their eating disorder is disturbing their sleep at night, their key worker and school nurse will initially talk to the parents/carers to work out how to prevent their child from falling behind. If applicable, the school nurse will consult with the professional treating the student.

This information will be shared with the relevant pastoral/ teaching staff on a need to know basis and to inform the Personal Care Plan.

Students Undergoing Treatment for/Recovering from Eating Disorders

The decision about how, or if, to proceed with a student's schooling while they are suffering from an eating disorder should be made on a case by case basis. Input for this decision should come from discussion with the student, their parents, local authority and members of the multi-disciplinary team treating the student.

The reintegration of a student into school following a period of absence from the Bridge or attending the Bridge for the first time, should be handled sensitively and carefully and again, the student, their parents, school staff and members of the multi-disciplinary team treating the student should be consulted during both the planning and reintegration phase.

Further Considerations

Any meetings with a student, their parents or their peers regarding eating disorders should be recorded in writing including:

- Dates and times
- An action plan
- Concerns raised
- Details of anyone else who has been informed

This information should be stored in the student's safeguarding file held by the Designated Person.

Self-Harm

Introduction

Recent research indicates that up to one in ten young people in the UK engage in self-harming behaviours. Girls are thought to be more likely to self-harm than boys. School staff can play an important role in preventing self-harm and also in supporting students, peers and parents of students currently engaging in self-harm.

Definition of Self-Harm

Self-harm is any behaviour where the intent is to deliberately cause harm to one's own body for example:

- 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

Risk Factors

The following risk factors, particularly in combination, may make a young person particularly vulnerable to self-harm:

Individual Factors:

- Depression/anxiety
- Poor communication skills
- Low self-esteem
- Poor problem-solving skills
- Hopelessness
- Impulsivity
- Drug or alcohol abuse

Family Factors

- Unreasonable expectations
- Neglect or physical, sexual or emotional abuse
- Poor parental relationships and arguments
- Depression, self-harm or suicide in the family
- Difficulty in making relationships/loneliness
- Being bullied or rejected by peers

Possible warning signs include:

- Changes in eating/sleeping habits (e.g. student may appear overly tired if not sleeping well)
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood e.g. more aggressive or introverted than usual
- 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. always wearing long sleeves, even in very warm weather
- Unwillingness to participate in certain sports activities e.g. swimming

Staff Roles in working with students who self-harm

Students may choose to confide in a member of school staff if they are concerned about their own welfare or that of a peer. School staff may experience a range of feelings in response to self-harm in a student such as anger, sadness, shock, disbelief, guilt, helplessness, disgust and rejection. However, in order to offer the best possible help to pupils it is important to try and maintain a supportive and open attitude – a pupil who has

chosen to discuss their concerns with a member of school staff is showing a considerable amount of courage and trust.

Students need to be made aware that it may not be possible for staff to offer complete confidentiality. If you consider a student is at serious risk of harming themselves then confidentiality cannot be kept. It is important not to make promises of confidentiality that cannot be kept even if a student puts pressure on you to do so.

Any member of staff who is aware of a student engaging in or suspected to be at risk of engaging in self-harm should consult the Safeguarding leads.

Following the report, the Head of School will decide on the appropriate course of action.

This may include:

- Contacting parents / carers
- Arranging professional assistance e.g. doctor, nurse, social services
- Arranging an appointment with a counsellor
- Arranging a referral to CAMHS or private referral – with parental consent
- Immediately removing the student from lessons if their remaining in class is likely to cause further distress to themselves or their peers
- In the case of an acutely distressed pupil, the immediate safety of the pupil is paramount and an adult should remain with the student at all times
If a student has self-harmed in school a first aider should be called for immediate help

Further Considerations

Any meetings with a student, their parents or their peers regarding self-harm should be recorded in writing including:

- Dates and times
- An action plan
- Concerns raised
- Details of anyone else who has been informed

This information should be stored in the student's safeguarding file held by the Designated Person. It is important to encourage students to let staff know if one of their group is in trouble, upset or showing signs of self-harming. Friends can worry about betraying confidences so they need to know that self-harm can be very dangerous and that by seeking help and advice for a friend they are taking responsible action and being a good friend. They should also be aware that their friend will be treated in a caring and supportive manner.

The peer group of a young person who self-harms may value the opportunity to talk to a member of staff either individually or in a small group. Any member of staff wishing for further advice on this should consult either the Head of School Head of Student and Staff Development and Welfare. When a young person is self-harming it is important to be vigilant in case close contacts with the individual are also self-harming. Occasionally schools discover that a number of students in the same peer group are harming themselves.

Appendices

Appendix I Personal Care Plan

Appendix II Social Emotional Profile Tracker

Appendix III Student Targets

Appendix IV Information advice and guidance to support Wellbeing,
Welfare and Mental Health

The Bridge

Personalised Care Plan

Student name	Date of birth	Year group	Mainstream referral school and contact number

Parent Name	
Address	
Contact number	
Parental email	
Other relevant agencies involved	
Any other relevant/ useful information	

Mainstream School Attendance Record			
Please provide attendance base-line data		Date of last day attended	
<i>Brief account of previous school history and relevant dates</i>			

Profile on Admission (please fill in where appropriate)

Medical Diagnosis

Under the care of:
(Attach Details)

Student Views

Parent/carer's views

CAMHS/Medical Professional
Overview

Social Care :

Risk Factors :

Risk Assessment Required Y/N

Focus Areas/Strategies for Transition to The Bridge

Allocated Staff Member	
Agreed Timetabled Hours	
Additional Support	

Appendix II

Social and Emotional Student Questionnaire

For each statement please circle -

- 1 = rarely
- 2 = sometimes
- 3 = often
- 4 = almost always

It would help us if you answer all the statements as best you can, even if you are not absolutely certain or don't think it applies to you. You will be asked to do one of these in PSHCEE every term with the hope that you will become more confident throughout the year. You will also be encouraged to set yourself a personal SE (social and emotional) target of something that you would really like to achieve over your time here at The Bridge. We can then support you in achieving this target.

Student:	Date:
Year group:	Total score /80
Percentage: %	Percentage change from previous assessment: %
Is there anything that has influenced your answers today? (positive or negative)	

1. Social Skills

I can cope with increasing numbers of people eg; using public transport, attending trips	1	2	3	4
I communicate appropriately and effectively with others	1	2	3	4
I can work alongside or share with others in a group in a positive way	1	2	3	4
I socialise positively with others during break times	1	2	3	4
I use people's names when talking to them and maintain eye contact	1	2	3	4
I am happy to give and receive normal physical contact with others eg; shaking hands, during PE, hugging friends etc	1	2	3	4
I can manage my own needs in school	1	2	3	4
I am interested in other people	1	2	3	4
I have a sense of humour	1	2	3	4
I feel attending The Bridge is having a positive impact on my social skills and health	1	2	3	4
Score	/40			

1. Emotional skills

I can show empathy and consideration for other people's feelings	1	2	3	4
I can fail at something without becoming too upset	1	2	3	4
I can recognise my triggers and say how I am feeling eg: sad, angry etc	1	2	3	4
I am not worried, anxious or upset	1	2	3	4
I don't complain of feeling ill regularly	1	2	3	4
I can accept praise eg: when I do a good piece of work	1	2	3	4
I can recognise my triumphs and shows pride in my achievements and presentation (both my work and myself)	1	2	3	4
I have self-esteem	1	2	3	4
I have parental support	1	2	3	4
I feel attending The Bridge is having a positive impact on my emotional skills and mental health	1	2	3	4
Score	/40			

The Bridge Social and Emotional Profile Tracker

Thank you for agreeing to complete this form. Your child will also be completing a similar form as well as their teachers. Answering these statements will help give us an overall picture of how your child is coping at The Bridge. It will show us areas of strength where you feel your child has made progress as well as areas for further development, including any intervention we may be able to offer. We will ask you to complete these twice a year.

Each statement is allocated a score:

- 1= rarely
- 2= sometimes
- 3= frequently
- 4= almost always

Student:	Date:
Year group:	Total score /80
Percentage: %	Percentage change from previous assessment: %
Is there anything that has influenced your answers today? (positive or negative)	

1. Social Skills

Can cope with increasing numbers of people eg; using public transport, attending trips	1	2	3	4
Has appropriate and effective communication skills	1	2	3	4
Can work alongside others in a positive and collaborative way	1	2	3	4
Interacts positively with others when not at school	1	2	3	4
Addresses others with names and maintains eye contact	1	2	3	4
Makes and accepts normal physical contact with others	1	2	3	4
Is self-reliant in managing own needs outside of school	1	2	3	4
Shows genuine interest in others	1	2	3	4
Shows a sense of humour	1	2	3	4
Feels attending The Bridge is having a positive impact on their social skills and health	1	2	3	4
Score	/40			

1. Emotional skills

Shows empathy for and consideration for other people's feelings	1	2	3	4
Can risk failure without becoming upset	1	2	3	4
Can recognise triggers and states feelings about self eg: sad, angry etc	1	2	3	4
Does not seem worried, anxious or upset	1	2	3	4
Does not complain of feeling ill	1	2	3	4
Accepts praise appropriately eg: when does something well	1	2	3	4
Recognises triumphs and shows pride in achievements and presentation	1	2	3	4
Has self-esteem	1	2	3	4
Is willing to accept your support	1	2	3	4
Feels attending The Bridge is having a positive impact on their emotional skills and mental health	1	2	3	4
Score	/40			

Appendix III

Action Plan from Assessment

Date of assessment

Target	Who/when	Strategies to support	Evidence of success
1.			
2.			
Pupil personal target			

Appendix IV

Information advice and guidance to support Wellbeing, Welfare and Mental Health

Local Support

Havering CAMHS:

<https://familyserviceshub.havering.gov.uk/kb5/havering/directory/service.page?id=jE2Hveph6AU>

Barking and Dagenham CAMHS: <https://www.nelft.nhs.uk/resources-barking-anddagenham-camhs>

Havering MIND: <https://www.haveringmind.org.uk/>

SEND/ Local Offer:

<https://familyserviceshub.havering.gov.uk/kb5/havering/directory/localoffer.page?localofferchannel=0>

Safety, Support and Services

As a school we believe a child's safety, security and happiness are paramount. See below general websites for support and services related to; abuse, bullying, grooming, gangs and online safety. In addition, these websites will provide information and advice for wellbeing, emotional wellbeing and mental health.

<https://www.childline.org.uk/> <https://www.nspcc.org.uk/>

<https://www.barnardos.org.uk/>

<https://www.childrensociety.org.uk/>

<https://www.actionforchildren.org.uk/>

<https://www.familylives.org.uk/>

<https://www.ceop.police.uk/safety-centre/>

<https://saferlondon.org.uk> <https://www.victimsupport.org.uk/>

<https://www.saferinternet.org.uk/>

<https://www.getsafeonline.org/>

<https://www.thinkuknow.co.uk/>

<https://www.itai.info/staying-safe-online/>

General Health

General physical health and wellbeing is important. See below websites for information and support related to; health eating, exercise, smoking, drinking and drugs. In addition, these websites may provide information and advice for wellbeing, emotional wellbeing and mental health.

<https://www.nhs.uk/oneyou/every-mind-matters/>

<https://www.drinkaware.co.uk/advice/underage-drinking/teenage-drinking/>

<https://www.nhs.uk/smokefree> <https://www.talktofrank.com/> <https://www.nhs.uk/change4life>

General Mental Health Advice and Support

Mental Health is just as important as physical health. See below for websites, self-help guides and support phone/text lines dedicated to supporting and promoting positive mental health. NHS: <https://www.nhs.uk/oneyou/every-mind-matters/>

<https://web.nrw.nhs.uk/selfhelp/> This is a particularly useful link to online advice guides for a range of emotional, wellbeing and mental health needed. Highly recommended.

Mental Health Foundation—booklet: How to look after your mental health using mindfulness <https://www.mentalhealth.org.uk/sites/default/files/How%20to...mindfulness.pdf>

Mind: Promotes the views and needs of people with mental health problems. Phone: 0300 123 3393 (Monday to Friday, 9am to 6pm) Website: www.mind.org.uk

Rethink Mental Illness: Support and advice for people living with mental illness. Phone: 0300 5000 927 (Monday to Friday, 9.30am to 4pm) Website: www.rethink.org

SANE: Emotional support, information and guidance for people affected by mental illness, their families and carers. Textcare: comfort and care via text message, sent when the person needs it most: www.sane.org.uk/textcare Peer support forum: www.sane.org.uk/supportforum Website: www.sane.org.uk/support

YoungMinds: Information on child and adolescent mental health. Services for parents and professionals. Phone: Parents' helpline 0808 802 5544 (Monday to Friday, 9.30am to 4pm) Website: www.youngminds.org.uk

The Mix: Understanding mental health can be tricky but The Mix is here to make sure you don't have to do it alone. Whether you're worried about your mental health, or someone else's, we have everything you need to know about mental health, from anxiety and depression to self-care and counselling. <https://www.themix.org.uk/mental-health>

Time to Change: Lets end Mental Health discrimination. <https://www.time-to-change.org.uk/>

Kooth App: We know that this is a scary time, there is a lot of uncertainty, but Kooth has your back! Through Kooth you can access free, safe, anonymous, online wellbeing support.

<https://www.kooth.com/video>

SHOUT: For support in crisis Text Shout to 85258 <https://www.giveusashout.org/>

Attachment: Attachment is an emotional bond with another person. Bowlby believed that the earliest bonds formed by children with their caregivers have a tremendous impact that continues throughout life. He suggested that attachment also serves to keep the infant close to the mother, thus improving the child's chances of survival. (Bowlby & Ainsworth)

Recommended Books: Louise Michelle Bomber (2007) Inside I'm Hurting: Practical strategies for supporting children with attachment difficulties in school. Louise Michelle Bomber (2020) Know Me Teach Me: Differentiated discipline for those recovering from adverse childhood experiences.