

Aspire Academy
Student Wellbeing Policy
September 2022



*The Local Governing Committee has agreed that this policy will be reviewed every year. This review will take into consideration all aspects of applicable legislation and advice current at the time of the review. The next 'Period of Review' will be **SEPTEMBER 2023**.*

Our Ethos and Values

At Aspire our ethos is to develop the individual moulding independent learners and confident young minds.

We aspire to be a community founded upon mutual trust where everyone is loved and respected for who they are. We believe that in working together we can accomplish more than we could alone.

Values:

As an Alternative Provision Academy, our core values are empathy, courage and community:

- **Empathy** is essential to human life and lies at the heart of all successful relationships. Empathy is an unspoken language that we aim to teach and develop in others. In this way we develop self-awareness and depth of human engagement;
- **Courage** is a trait that needs to be developed in everyone. Life throws many challenges at us and we need to be prepared to face those challenges through developing deep personal reserves. We believe that developing individual strength and conviction enables students for the rest of their lives;
- We aim to be an **inclusive community**. Each person is needed, valued and important. When things go wrong we will forgive each other and make a fresh start. We will share what we have with those in need and try to treat others as we would like them to treat us.

Aims

As an Alternative Provision Academy, we aim to:

- Treat learners, staff and visitors with respect;
- Incorporate and promote the values behind the academy in all we do;
- Instil a sense of self-worth and value in every learner;
- Encourage learner participation in the planning and the running of our Academy wherever possible;
- Encourage emotional literacy as a way of interpreting the world around us;
- Encourage, challenge and support every person to achieve his or her potential.

Introduction

As part of our Academy culture and ethos, and continued dedication to the health and happiness of our students, this guidance provides a clear set of protocols for ensuring the well-being and welfare of all students. Progress and achievement in schools, both emotional and academic, depends on this.

Only medical professionals should make a diagnosis of a mental health difficulty. However, those in school are well placed to observe young people day to day and identify those whose behaviour suggests that they may be suffering from a mental health problem or be at risk of developing one.

This guidance should be followed with close reference to the 'Safeguarding and Child Protection Policy'.

This guidance is in eight parts:

1. What is self-harm?
2. What is an eating disorder?
3. The process of referral
4. Supporting pupils with mental health issues
5. Supporting staff who are working with students with mental health issues
6. Monitoring, evaluation and accountability
7. Linked policies

1. What is Self-Harm?

Self-harm describes a wide range of behaviours that people use with the intent of deliberately causing harm to one's own body. This includes, but is not limited to:

- 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

Recent research indicates that up to one in six young people in the UK engage in self harming behaviours (Good Childhood Report, 2018). The most common age is between the ages of 11 and 25. The same research suggests girls are twice as likely as boys to self-harm. Self-harm is a coping mechanism and it is more important to recognise and respond to the underlying reasons. The following risk factors, particularly in combination, may make a young person particularly vulnerable to self-harm:

- Depression/anxiety
- Poor communication skills
- Low self-esteem
- Poor problem solving skills
- Hopelessness
- Impulsivity

- Family factors
- Social factors

2. What is an eating disorder?

The most common eating disorders are anorexia nervosa and bulimia nervosa. Eating disorders can emerge when worries about weight begin to dominate a person's life. Someone with anorexia nervosa worries persistently about being fat and eats very little. They lose a lot of weight and, if female, their periods may stop. Someone with bulimia nervosa also worries persistently about weight. They alternate between eating very little, and then bingeing. They vomit or take laxatives to control their weight. Both of these eating disorders affect girls and boys but are more common in girls. The strongest evidence supports:

- The primary aim of intervention is restoration of weight and in many cases inpatient treatment might be necessary;
- For young people with anorexia nervosa, therapeutic work with the family, taking either a structural systemic or behavioural approach may be helpful even when there is family conflict; and
- For young people with bulimia nervosa, individual therapeutic work focusing on cognition and behaviour, for example to change thinking patterns and responses.

Evidence also supports:

- Early intervention because of the significant risk of ill-health and even death among sufferers of anorexia;
- School-based peer support groups as a preventive measure (i.e. before any disordered eating patterns become evident) may help improve body esteem and self esteem; and
- When family interventions are impracticable, cognitive-behavioural therapy may be effective.

3. The Process of Referral

As an Academy we aim to detect and address problems in their earliest stages. There is a fine line between appropriate responsiveness and inappropriate intrusiveness into the personal lives of students and their families, however all staff must respond to well-being and welfare concerns of our students no matter what.

Any staff member concerned about the mental health and wellbeing of a student should speak to the student's tutor teacher, who has daily contact with the student, to share their concerns. Tutor teachers are well placed to spot changes in behaviour which may indicate a problem. The tutor should in turn discuss the student with the appropriate member of pastoral staff, likely to be either the Designated Safeguarding Lead or the Child Protection Officer.

If any member of staff feels that the student is in immediate danger of harm then normal 'Safeguarding' procedures should be followed.

If the student has seriously self-harmed then staff should follow the normal procedures for medical emergencies, including seeking advice from the named member of staff responsible for First Aid.

4. Supporting students with mental health issues

Schools offer important opportunities to prevent mental health problems by promoting resilience. Providing pupils with inner resources that they can draw on as a buffer when negative or stressful things happen can help them to thrive even in the face of significant challenges. However these strategies do not work for all young people and for some they may not feel able to cope with their problems. It is important when responding to students who are self-harming that you remain calm and non-judgemental. You should not:-

- dismiss concerns or disclosures as insignificant, they may provide a vital link to other information;
- keep such concerns to themselves;
- promise secrecy to children or adults making disclosures but reassure them that information will be shared appropriately and confidentially.

The Academy aims to increase the appropriate level of support available to students with mental health issues in partnership with outside health agencies and support groups. We are able to signpost and/or refer students, parents and carers to other agencies who support young people with mental health issues, including self-harm and eating disorders. Support available includes, but is not exclusive to:

- Tutor / pastoral team support
- Referral to the School Nurse
- Referral to the Academy's Mental Health Nurse or Counsellor
- Referral to external services such as MIND, BEAT, SEED etc
- GP Services
- CAMHS (Children and Adolescent Mental Health Services) referral

5. Supporting staff who are working with students with mental health issues

Aspire Academy acknowledges that staff who are working closely with distressed students can themselves be placed under emotional strain. Many staff have been given the opportunity to undertake Level 2 training in Mental Health problems and mental health will form part of regular staff CPD input. Weekly supervision sessions are available to all staff with the Designated Safeguarding Lead and daily de-brief sessions are held with pastoral leads. Staff can also access the Academy's Mental Health nurse and be referred for further support external to the Academy if needed.

6. Monitoring, Evaluation and Accountability

The monitoring and evaluation of this policy will be carried out by the Vice Principal (Designated Safeguarding Lead) and reported as requested by Governors.

7. Linked Policies

- Safeguarding and Child Protection Policy
- RSE Policy
- Anti-Bullying Policy
- SEN Policy

Suggested Resources

MindEd, a free online training tool to enable school staff to learn more about specific health problems

Kooth

Childline Education Endowment Foundation

YoungMinds

HeadMeds

National Institute for Health and Care Excellence (NICE)

Relate