Mental Health and Wellbeing Strategy

2023 - 2026

INTRODUCTION

The World Health Organisation defines mental health and wellbeing as:

"a state of wellbeing in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community".

It is accepted that adverse childhood experiences, the stresses of everyday life and unfortunate, unforeseen events can have a negative impact on mental health and wellbeing. Post pandemic, the NHS (2021) has reported that 'rates of probable mental health disorders have increased since 2017; in six- to sixteen-year-olds from one in nine (11.6%) to one in six (17.4%), and in seventeen- to nineteen-year-olds from one in ten (10.1%) to one in six (17.4%).'[1]

In 2021 the government published 'Promoting Children and Young People's Mental Health and Wellbeing. A Whole School or College Approach' which recognises that 'a child's emotional health and wellbeing influences their cognitive development and learning as well as their physical and social health and their mental wellbeing in adulthood.' The proposals set out a range of actions for schools and colleges 'to embed a culture of openness around mental health and forge stronger links between education and health to ensure children and young people can access appropriate support.'

Our Mental Health and Wellbeing Strategy recognises the importance of embedding a whole college approach to mental health and wellbeing. It is a broad approach which goes beyond teaching and learning in the classroom. The strategy seeks to promote social, emotional, and physical wellbeing in all aspects of college life, helping students through change and challenge, and engaging the whole community in a positive environment imbued with empowerment, resourcefulness and resilience.

This Strategy should be read in conjunction with the following related documents: Keeping Children Safe in Education; Safeguarding and Child Protection Policy; Equality, Diversity and Inclusion Policy; Student Behaviour Policy, Student Voice Policy, Fitness to Study Procedure and Supporting Learners - an outline of provision for students with additional needs within the framework of the West Sussex County Council Local Offer.

Director of Student Support/DSMHL

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[1] https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2021-follow-up-to-the-2017-survey

Our Vision:

To develop, promote and embed a whole college approach to positive mental health and wellbeing which enables everyone to thrive and achieve success.

The college pursues this vision using both universal, whole college approaches and specialised, targeted approaches aimed at vulnerable students.

The Strategy

Underpinning the strategy are eight key principles which are designed to promote a whole college approach to emotional health and wellbeing:

Promoting children and young people's mental health and wellbeing A whole school or college approach.
(HM Government and Children and Young People's Mental Health Coalition, 2021)

Strategic Aims:

1. To establish and embed a culture of inclusiveness and positive mental health and wellbeing which focuses on prevention, early identification, and intervention.
2. To deliver a comprehensive, responsive, and collaborative support provision where all members of our community can feel safe and access internal and external provisions to support their mental health and wellbeing.
3. To engage students in the assessment of their mental health and wellbeing and equip them with the resourcefulness needed to overcome barriers to learning and wellbeing.
4. To work collaboratively with external stakeholders, for example, parents/carers, GP practices, and the Integrated Front Door (IFD).

The college commits to meeting these aims through:

Leadership and Management

- Designated Link Governor for Mental Health and Wellbeing.
- Regular reporting via SMT and Governors and via the quality assurance cycle.
- Designated Vice Principal (Pastoral) who leads on the cross-college support provision for students.
- Designated Senior Mental Health Lead / Director of Student Support
- Head of Student Wellbeing who oversees the wellbeing provision for students.
- Experienced and well-trained Safeguarding Team.
- Director of Student Engagement who leads on pastoral guidance, behaviour and intervention.
- Regular liaison with other colleges – S7 (sharing good practice)
- Continuing participation in the Mercer's Wellbeing Evaluation project.

Ethos and Environment

- Clear behaviour management policies which include the Student Behaviour Policy, Student Code of Conduct and the Equality, Diversity and Inclusion Policy.
- Ensuring adherence to the Safeguarding and Child Protection Policy and statutory guidance contained in 'Keeping Children Safe in Education'.
- Promoting a positive culture of disclosure via curriculum, pastoral and support systems, wall displays and SharePoints such as Student Services, Student Wellbeing and Student Safeguarding. This ensures students are effectively supported before, during and after their studies at Collyer's.
- Providing and developing a range of online resources for on-going support and guidance for students, staff and parents/carers.
- Having a Fitness to Study procedure which addresses support and actions in the context of mental health issues.

Curriculum

- Ensuring mental health and wellbeing enrichment is in place via Collyer's 360.
- Dissemination of a strong pastoral programme which promotes positive attitudes and a focus on individual Vision, Effort, Systems, Practice and Attitudes (VESPA). The tutorial programme also includes strong focus on Relationships, Sex and Health Education (RSHE).
- Engaging in targeted activities throughout the academic year, (with students and parents/carers) to promote support for mental ill health with an increased emphasis during key periods in the academic calendar, for example, induction, Emotional Wellbeing Week and the lead up to exams.
- Progress Reviews which create the opportunity for students to identify and build on their strengths and identify individual targets.
- Provision of a Student Support Department where students can access triage and support with their mental health and emotional wellbeing.

Student Voice

- Having a Student Voice Policy which encapsulates the approach taken to ensure all students can articulate their views and concerns through a variety of mechanisms.
- Facilitating an active students' union co-ordinated by the Richard Collyer Union (RCU) Manager.

- Student Union Officers who liaise closely with tutor reps and work with SMT to ensure the student voice is raised in key areas such as pastoral and wellbeing support.
- Student Evaluations and Wellbeing surveys.

Staff Development and Support

- Annual safeguarding update training for all staff.
- Mental Health First Aid and Applied Suicide Intervention Skills Training (ASIST) for key staff.
- Supporting staff to access a wide range of training and development opportunities including restorative practice, mental health awareness and trauma informed approaches.
- Staff wellbeing initiatives and support, for example, Staff Wellbeing Day and the Staff Wellbeing Platform.

Targeted Support

- Effectively triaging and signposting to appropriate internal and/or external support through the pastoral system, Student Services, and the Safeguarding team.
- Providing a free counselling service.
- Embedding into the Enrichment Programme the '.b' mindfulness course and additional short, tailored, courses designed to provide students with the understanding and strategies to self-manage. For example, courses on social anxiety and academic anxiety.
- Student Services who provide a mental health and wellbeing triage. They also provide information and advice on non-'mental health' support, such as financial help and advice relating to housing issues, which can have a positive impact on mental health and wellbeing.

Parents and Carers

- Work with parents and carers to promote and support student mental health and wellbeing.
- Provide access to resources and advice regarding mental health and wellbeing, for example, via the Parent Platform for Student Support.
- Actively engage parents and carers in the support being offered to their student regarding specific mental health and wellbeing concerns.

External Partnerships

- Contributing to multi-agency support for students via close liaison with relevant professionals in health and social care, for example, Children's Mental and Emotional Wellbeing Team, Early Help and CAMHS.
- Liaising with feeder schools to facilitate transition for SEND and/or vulnerable students,

Audit and Evaluation

- Clear record keeping regarding students presenting with mental health and wellbeing issues via MyProgress.
- Record keeping for mental health incidences via MyProgress, CPOMS, First Aid Incidence Log.
- Safeguarding and Student Support SAR/QIP.
- Student Wellbeing Survey and wellbeing course feedback.

An Overview of Provision

Tier 1 Provision Whole College programme for Students, Parents/Carers, and Staff

(WSCC Level 1 – Universal – see Continuum of Needs)

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Wellbeing courses – . b Mindfulness, Social Anxiety, Academic Anxiety
Tutorial programme – including VESPA and RSHE
Pastoral Team available to all students
Student Services as wellbeing triage available to all students
Wellbeing and Study Support Hubs
SharePoint sites: Student Services / Wellbeing / Safeguarding
Therapy Dogs – students and staff
Connections Scheme (for meeting new people)
Counselling available to all students and staff: Dialogue/Relate
Student Voice activities - Surveys (e.g., Wellbeing and RCU)
Wellbeing Week – students and staff
Wellbeing section in the library. Books / journals
Parent/Carer Platform – Student Support
Staff Meditations

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Students involved-
All students can access wellbeing courses throughout the year.
All students have access to other 'offers' (tutor materials, SharePoint)
People involved-
Subject staff
Student Services
Wellbeing team
Study Support team
Pastoral Tutors including Heads of House
Trained Youth Mental Health First Aiders
Library team

Tier 2 Provision

(WSCC level 2 – Emerging needs. See Continuum of Needs)

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Triage can lead to:
1. Referral to Head of Student Wellbeing
2. Referral to Dialogue, Relate or online counselling (if face to face support is not wanted)
3. Referral to Safeguarding Team (DSL/DDSL)
4. Referral to Study Support team.
5. IFD Referral for Early Help
6. Supported referral to GP – YES/CAMHS

Additional Tier 1 Provision:
Targeted Wellbeing Courses: .b mindfulness, social anxiety, academic anxiety

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People Involved: -
Subject staff
Student Services
Study Support Team
Tutors / Heads of House / Pastoral Directors
Counsellors
Wellbeing team
Safeguarding team
Trained Youth Mental Health First Aiders

Tier 3 Provision

(WSCC level 3 – Complex needs. See Continuum of Needs)

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Offer: -
Referral to Safeguarding Team (DSL/DDSL)
Integrated front Door (IFD) referral and/or SPOA referral.
College Counselling Service – Dialogue / Relate
Wellbeing support – safeguarding 'check-ins'

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People Involved: -
Tutors / Heads of House / Pastoral Directors
Safeguarding team
IFD / MASH/ Police
Counsellors

Tier 4 Provision

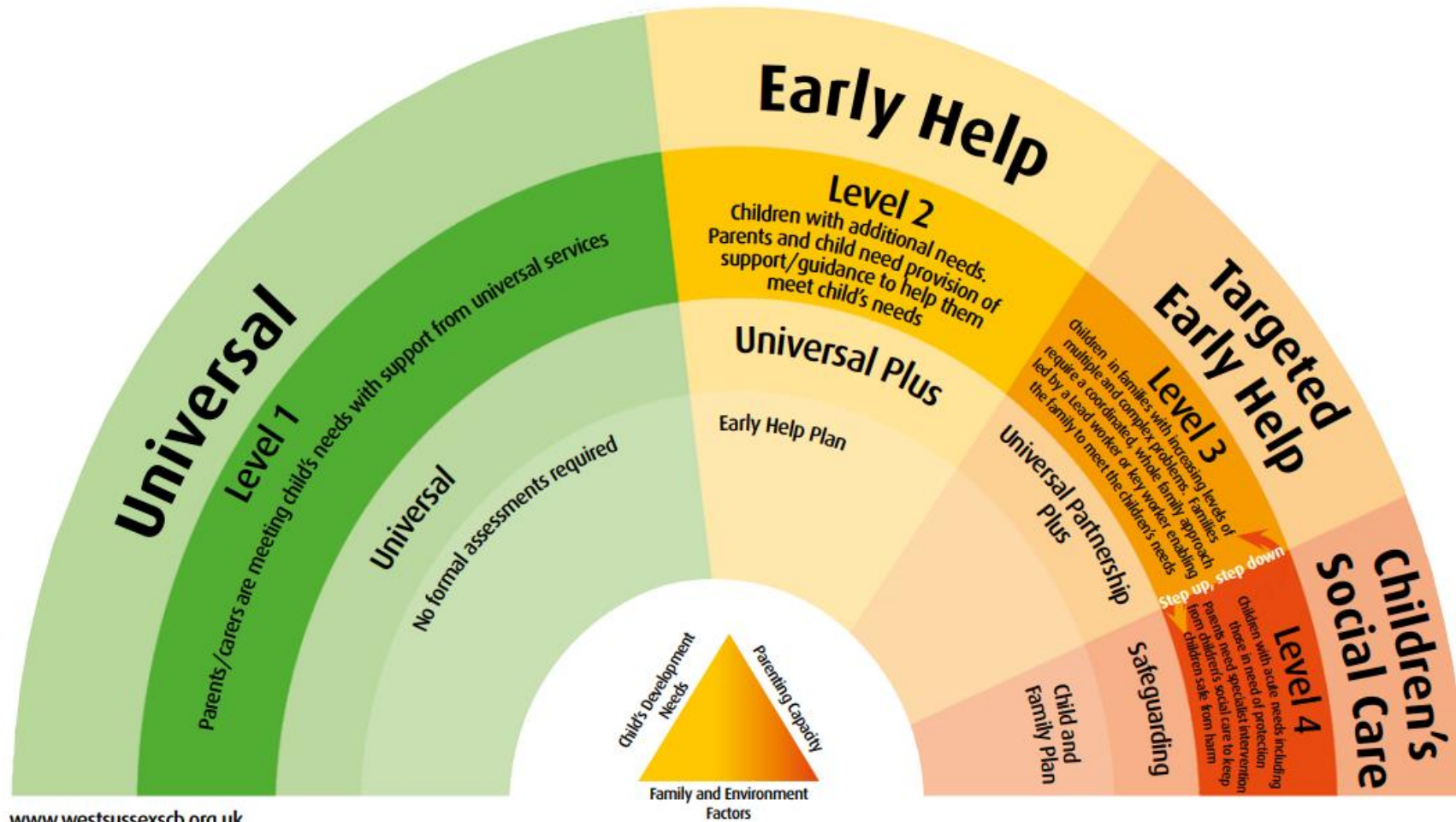**(WSCC Safeguarding/ Specialist Needs- level 4. See Continuum of Needs)**

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Offer: -
IFD Referral by safeguarding team.
Direct contact with police
Children's Mental and Emotional Wellbeing Team.
Wellbeing support – safeguarding 'check-ins'

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People Involved: -
Safeguarding team
IFD / MASH
Police

West Sussex
Continuum of Needs

**West Sussex
Safeguarding
Children Board**

Early Help

Universal

Level 1
Parents/carers are meeting child's needs with support from universal services

Universal

No formal assessments required

Level 2
Children with additional needs.
Parents and child need provision of
support/guidance to help them
meet child's needs

Universal Plus

Early Help Plan

Targeted Early Help

Level 3
Children in families with increasing levels of
multiple and complex problems. Families
require a coordinated, whole family approach
led by a Lead worker or key worker enabling
the family to meet the children's needs

Universal Partnership Plus

Step up, step down

Children's Social Care

Level 4
Children with acute needs including
those in need of protection
parents need specialist intervention
from children's social care to keep
children safe from harm

Safeguarding

Child and Family Plan

Child's Development Needs

Parenting Capacity

Family and Environment Factors

Appendix 3:

West Sussex Safeguarding Children Board and Think Family Partnership Threshold Chart

West Sussex Safeguarding Children Board

Threshold level for intervention and support	Universal, Level 1	Early Help, Level 2	Targeted Early Help, Level 3	Children's Social Care, Level 4
	Family life can meet children's needs with support from universal provision. May need limited additional intervention from universal settings to prevent needs arising.	Child/ young person has additional needs identified that can be met within identified resources through a single agency response and partnership working with the family. Parents need advice and guidance to help them understand and meet need.	Children in families with increasing levels of multiple and complex problems. Families require a coordinated, whole family approach led by a Lead worker or key worker enabling the family to meet the children's needs.	There is an accumulation of unmet and complex needs/ evidence that a child is at risk of harm. Assessment and intervention by Children's Social Care is required to work in partnership to build a safety plan that protects the children and ensures the family can meet their needs.

The following circumstances, key worries and complicating factors are for guidance and should always be considered in respect of the impact on the child or young person

Key worries & complicating Factors				
	Developmental needs • Achieving learning targets • Good attendance • Meeting developmental milestones • Has psychological well-being • Socially interactive and skilled • Ability to protect self and be protected **Family and environment** • Supportive relationships • Housed, good diet and kept healthy • Supportive networks • Access to positive activities • Access to sufficient income **Parents and carers** • Protected by carers Secure and caring home • Receive and act on information, advice and guidance • Appropriate boundaries maintained	**Developmental Needs** • Absence / truancy from school • Incidence of absence / missing from home • Use of internal exclusion/seclusion or alternative provision in school • Risk of social exclusion • Poor attachments • Language and communication difficulties • Reduced access to core services • Disability or additional special need • Potential for disengaging in education training and learning. • Potential not to attain • Slow in meeting developmental milestones • Missing health checks/immunisations • Minor health problems • Early signs of offending / anti-social behaviour • Underage sexual activity • Early signs of drug/alcohol misuse • Poor self-esteem • Low level emotional/mental health issues **Family and environment** • Young carers • Poor parent/child relationships • Children of prisoners / parents subject to community orders • Bullying/racist incident • Poor housing and poor home environment impacting on child's health • Community harassment / discrimination • Low income affects achievement/ Pupil Premium • Parenting advice needed to prevent needs escalating • Poor access to core services • Risk of relationship breakdown • Concerns about possible domestic abuse **Parents and carers** • Inconsistent care arrangements Poor supervision by parent/carer Inconsistent parenting • Poor response to emerging needs • Historic context of parents/carers own childhood • Parents need advice and help to meet needs of child with disability	**Despite intervention at 2, evidence of continuing...** **Developmental Needs** • Persistent absence from school • Emerging pattern of being missing from home • Use of fixed term/ permanent exclusion • Social exclusion • Poor attachments • No access to core services • Has disengaged from education employment or training. • Young person is NEET • Developmental milestones not being met due to persistent parental failure/inability • Chronic/recurring health problems • Regular missed appointments affecting developmental progress • Teenage pregnancy • Drug/alcohol misuse impacting negatively • Risky sexual behaviour (e.g. unprotected sex) • Offending/anti-social behaviour resulting in risk of entering Youth • Emotional/mental health issues **Family and Environment** • Housing tenancy at risk/intentionally homeless. • Community harassment / discrimination • Domestic abuse • Relationship breakdown • Transient families • Risk of exposure to extreme or violent political or religious groups **Parents and Carers** • Parental learning or physical disability, substance misuse or mental health impacts on parenting • Inconsistent care arrangements • Poor supervision by parent/carer • Inconsistent parenting • Poor response to identified needs • Historic context of parents/carers own childhood • Parents are struggling and meet the needs of a child with disability	**Persistent/continued/severe...** **Developmental Needs** • Chronic persistent absence, permanent exclusions or no school place that risks entry to the care system • Persistent social exclusion • Poor attachments • Complex / multiple disabilities • Complex mental health issues affecting developmental needs, including self-harm • High level emotional health issues and very low self-esteem • Non-organic failure to thrive • Sexually inappropriate behaviour Young person placing themselves at risk. • Sexually aggressive behaviour • Teenage parent/pregnancy under the age of 13 • Sexual exploitation/ abuse/ trafficking • Drug/alcohol use severely impairing development • Frequently missing from home resulting in self-neglect • Relationship breakdown • Offending and in the criminal justice system • Unaccompanied minors **Family and environment** • Suspicion of physical, emotional or sexual abuse or neglect • Domestic abuse resulting in child being at risk of significant harm • Homeless child/young person • Family intentionally homeless • Community harassment/discrimination • Extreme poverty affecting child well-being • Forced marriage, Honour Based Violence, Female Genital Mutilation • Exposure to extreme or violent political or religious groups **Parents and carers** • Edge of care • Parental encouragement of abusive/offending behaviour • Continuing poor supervision in the home • Parental non-compliance/disguised non-compliance or co- operation • Inconsistent parenting affects child's developmental progress • Private fostering • Parents are consistently unable to meet the needs of their disabled child • Disabled children in receipt of overnight short breaks

Level of assessment	No formal assessment required	Early Help Plan		Child and Family Assessment and Plan