



INTRODUCTION

The purpose of Rochester Independent College's Mental Health Policy is to help ensure that the college provides a coherent and holistic approach when responding to students with mental health needs.

This policy forms part of a suite of pastoral care policies and should be read in conjunction with the college Eating Disorders, Self-Harm and Health Care policies

Definitions:

- The World Health Organisation (WHO) defines mental health as a 'state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community'
- A mental health problem is defined as a disturbance of function in one area of relationships, mood, behaviour or development of sufficient severity to require professional intervention (Dept. of Health 1995).
- A mental health disorder is defined as: 'a severe problem (commonly persistent) or the co-occurrence of a number of problems, usually in the presence of several risk factors' (Dept. of Health 1995)
- Mentally healthy students have the ability to develop emotionally within the normal range. Some students develop behavioural problems that are outside this normal range and these students could be described as experiencing mental health problems or disorders. These disorders can seriously impair academic performance.
- Education staff are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one (KCSIE 2023)

The college has specific legal responsibilities towards students whose mental health condition falls within the definition of disability under the Equality Act 2010. This requires us to ensure that students with a well-recognised mental illness are not discriminated against and that reasonable adjustments are put in place to support their learning.

School staff cannot act as mental health experts and should not try to diagnose conditions. However, there should be clear systems and processes in place for identifying possible mental health problems, including routes to escalate and clear referral and accountability systems. Students who are over the age of 16 will be encouraged to tell their parents about their problems or to give permission for a member of staff to do so. If it is felt that they are at risk to themselves, confidence will be broken and the parents informed. Students under the age of 16 will also be encouraged to talk to their parents or allow a member of staff to do so. In the case of refusal they will be treated on an individual basis with the final decision being taken by the team as to whether the parents should be involved.

Early intervention to identify issues and provide effective support is crucial. The college role in supporting and promoting mental health and wellbeing can be summarised as:

- Prevention: creating a safe and calm environment where mental health problems are less likely, improving the mental health and wellbeing of the whole school population and equipping students to be resilient so that they can manage the normal stress of life effectively. This will include teaching students about mental wellbeing through the curriculum and reinforcing this teaching through college activities and ethos
- Identification: recognising emerging issues as early and accurately as possible
- Early support: helping students to access evidence based early support and interventions
- Access to specialist support: working effectively with external agencies to provide swift access or referrals to specialist support and treatment

The college aims to provide a supportive environment that will help students with mental health difficulties to realise their full academic potential and to successfully complete their course. It also aims to facilitate and promote positive mental health and well-being by:

- Providing a range of support services such as the college nursing team, the counsellor, the Independent Listener and the pastoral team within the college.
- Having in place effective procedures for the disclosure of information in respect of students with mental health difficulties.
- Asking parents/carers for the students full medical disclosure on entry to the college, which includes any history of mental health/anxiety concerns.
- Working with the support network available for each student including family, medical professionals and guardians where appropriate.
- Encouraging students with mental health issues to seek support.
- Providing guidance and training to staff involved in the support and care of those with mental health difficulties.
- Ensuring that the sources of support are clearly communicated to both prospective and current students.
- Promoting understanding and recognition of mental health difficulties.
- Providing clear guidance on the confidentiality of personal information provided by students. However, whilst the college is committed to providing a supportive environment, it is important to recognise that it is not a mental health facility nor is it a therapeutic community. There are, of necessity, limits to the extent of the support which can be provided and it is not the responsibility of the college to replicate services that already exist in the community and the NHS. The college also has its own procedures for the maintenance of good order and for safeguarding academic standards which will apply to all students irrespective of their medical condition or specific needs.

Risk Factors influencing the mental health of children

There is no easy way of telling whether children will develop mental health issues or not. Some children maintain good mental health despite traumatic experiences, whilst others develop mental health issues even though they live in a safe, secure and caring environment. There are, however, some common risk factors that increase the probability that children will develop mental health problems.

These include individual factors, such as:

- having a long-term physical illness or learning disability
- family factors, such as parental conflict and inconsistent discipline
- having parents who separate or divorce
- having a parent who has had mental health problems, problems with alcohol or has been in trouble with the law
- having been severely bullied
- child abuse and neglect (physical abuse, neglect, sexual abuse, emotional abuse)
- experiencing the death of someone close to them /bereavement (grief, aggression, regression and adjustment difficulties)
- experiencing discrimination, perhaps because of their race, sexuality, gender or religion
- acting as a carer for a relative, taking on adult responsibilities
- having long-standing educational difficulties
- post-traumatic stress (caused by an event involving intense fear, helplessness or horror)
- environmental factors such as socio-economic disadvantages – living in poverty or homelessness (Mental Health Foundation, 1999)
- taking prescribed drugs such as Prozac (generic name fluoxetine) or Roaccutane (generic name isotretinoin) where there have been recorded side effects including bad headaches, blurred vision, dizziness, nausea, vomiting, seizures, stroke, diarrhoea, and muscle weakness. Additionally, serious mental health problems, such as depression and suicide, have been reported with isotretinoin use. All students treated with Prozac or isotretinoin will be observed closely for symptoms of depression or suicidal thoughts, such as sad mood, irritability, acting on dangerous impulses, anger, loss of pleasure or interest in social or sports activities, sleeping too much or too little, changes in weight or appetite, decreasing school or work performance or trouble concentrating, or for mood disturbance, psychosis or aggression.

Childhood and adolescent mental health disorders and neurodiversity

These may include:

- Conduct disorder (e.g. aggression, destroying or losing of property, deceitfulness or theft, truanting or running away etc.)
- ADHD (inattention, hyperactivity and impulsivity)
- Deliberate self-harm (suicidal behaviour – suicide is very unusual)
- Eating disorders e.g. anorexia, bulimia, binge eating or EDNOS (eating disorders not otherwise specified)
- Obsessive-compulsive disorder (obsessions, compulsions that interfere with daily activities of living)
- Anxiety disorders (e.g. anxiety, phobias, panic, and school-phobia)
- Soiling and wetting

- Autism (social deficits, communication difficulties, restrictive and repetitive interests and behaviours)
- Substance abuse (abuse and dependence)
- Depression and bipolar disorder
- Schizophrenia (abnormal perceptions, delusional thinking, thought disorders)

PREVENTION AND PROTECTIVE FACTORS

RIC has the following in place to help students to cope with school life with the aim of helping to prevent problems from developing. These systems also enable staff to recognise and help students with mental health problems.

- Whole-school organisation: effective safeguarding and child protection policies including anti-bullying, staff code of conduct, effective procedures for staff to raise concerns, curriculum, tutorial system, open-door policy for students to raise problems, pastoral care, management of behaviour, SEN provision, promoting good staff-student relations, promoting good mental health
- Pastoral provision: The Assistant Principal (Pastoral) oversees the organisation of PSHE, the pastoral care system, early intervention, support and training for staff, support for vulnerable students and liaises with the school nursing team, mental health first aiders, DSL and external agencies
- Classroom practice: facilitative teaching, guidance and PSHE

PROCEDURES FOR IDENTIFICATION OF DISORDERS

Recognising when a child is suffering from mental health problems is not always easy but staff are often the 'front line' of identification.

As an integral part of their pastoral role, staff should be alert to the signs of possible mental health difficulties and bring this to the attention of the student's personal tutor/form tutor and/or the pastoral team should they feel it may be a cause for concern.

Staff with pastoral responsibilities such as form tutors, personal tutors and boarding staff are provided with training in recognising and supporting students with mental health issues.

Many children exhibit occasional episodes of disruptive or withdrawn behaviour or occasional bouts of 'naughtiness' - these are not necessarily cause for mental health concern.

Warning signs

All staff should be alert to the signs that a student's mental health is deteriorating, which includes:

Changes in mood or energy level

Changes in eating or sleeping patterns

Changes in attitude in lessons or academic attainment

Changes in level of personal hygiene
Increased social isolation from family or friends or becoming socially withdrawn
Poor attendance or punctuality
Increase in lateness or absenteeism
Expressing feelings of hopelessness, anxiety, worthlessness or feeling like a failure
Abuse of drugs or alcohol
Weight loss or gain
Secretive behaviour
Covering parts of the body that they wouldn't have previously eg long sleeves in warm weather
Refusing to participate in P.E. or being secretive when changing clothes
Physical pain or nausea with no obvious cause
Physical injuries that appear to be self-inflicted or non-accidental
Talking or joking about self-harm or suicide

The Pastoral Team

The college's Assistant Principal (Pastoral) is the senior mental health lead who has oversight of the college's approach to mental health and wellbeing. They are also a fully trained mental health first aider.

Led by the Assistant Principal (Pastoral) the pastoral team includes the college Nurse, college counsellor and Designated Safeguarding Lead or an Assistant DSL. They will hold a case meeting with any additional appropriate members of staff to discuss:

- specific child protection issues
- who information needs to be passed on to (other staff, parents/carers, multi-agency)
- the next steps to be taken
- actions to set in place to arrange appropriate support
- each student will have to be discussed and evaluated and an appropriate course of action chosen and drawn up onto a care/welfare plan, with re-evaluations carried out frequently

Medical Room

The college nurse provides general medical services to all students and this includes the provision of services and care for students with mental health concerns. Counselling services can be accessed through a referral from the college nurses or safeguarding lead.

Disclosure of Information

Students and parents/carers of students are encouraged to disclose their needs at the earliest opportunity to ensure that appropriate support is available. These support needs are communicated on a need to know basis and access to this information is restricted to the principal/senior vice-principal, College nurse and boarding staff (if relevant) and/or staff responsible for teaching the student. The purpose of the information is to ensure that appropriate staff are aware of the student's support needs and can put in place any reasonable adjustments that have been recommended.

Whilst we wish to respect student's wishes to keep issues confidential we also recognise that mental health needs may mean that the student involved does not have the ability to recognise the need for help.

Reference to other legislation and relevant college policies.

The Mental Health Policy is regularly updated in order that RIC complies with new legislation and good practice. Currently the Colleges policy is consistent with, and so reinforces:

- NHS/MOSA/BSA guidelines regarding mental health in Schools
- Data Protection Act 1998 (General Data Protection Regulation from May 2018)
- DofE Mental Health and Behaviour in Schools (November 2018)

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August 2017	AMB & PL	AB	August 2017
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Appendix 1 - Policy Flow Charts

1) Concern relating to mental health

