



St Patrick's GNS, Hollypark

RN: 19259W

Well-Being Statement

Ratified: October 2020

Signed: *Arthur Hutchinson*

Arthur Hutchinson, Chairperson BOM

At the time of drawing up this policy, all details and the enclosed information are correct. It is possible that between now and the review date, changes may have to be made to the provisions, policies and procedures of the school. This may be due to external changes required by the Department of Education and Skills, the school patron or other agencies. Mandatory policies will be available on the school website and up to date information will be posted regularly.

Rationale

The Irish College of Psychiatrists (2005) estimates that 8% of Irish children have a moderate to severe mental health difficulty and that 2% of children at any point in time will require specialist mental health intervention.

The Royal College of Surgeons in Ireland estimates that by the age of 13 years almost 1 in 3 young people will have experienced some form of mental disorder. Deliberate self-harm and suicide ideation had been experienced by 1 in 15 of 11 – 13 year olds at some time in their lives and longitudinal evidence shows that experience of a mental disorder during adolescence is a risk factor for future mental ill health (Cannon et al. 2013).

The Education Act, (Government of Ireland, 1998) states that the school's role is to promote the moral, spiritual, social and personal development of students and provide health education for them, in consultation with their parents, having regard to the characteristic spirit of the school. Mental health promotion at school and effective early intervention will facilitate compliance with the EPSEN Act. Mental health should permeate all aspects of school life and learning. Effective schools should therefore put systems in place to promote mental health and well-being and thus build resilience in both staff and students to help prepare them to cope with a range of life events.

Introduction

What is mental health?

There is no single accepted definition of 'mental health' but the following definition proposed by the World Health Organisation (WHO, 2001, p.1) is frequently used in contemporary literature. Mental Health is: A state of well-being in which the individual realises his or 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 own community.

The Mental Health Foundation (2002) suggests that **children who are mentally healthy possess the ability to:**

- develop psychologically, emotionally, socially, intellectually, spiritually
- initiate, develop and sustain mutually satisfying interpersonal relationships
- use and enjoy solitude
- become aware of others and empathise with them
- play and learn
- develop a sense of right and wrong
- resolve (face) problems and setbacks satisfactorily and learn from them (Alexander, 2002)

What is positive mental health and well-being?

Health is defined by the Department Of Health as: everyone achieving his or her potential to enjoy complete physical, mental and social wellbeing (Healthy Ireland, 2013). Positive mental health for children is part of their overall health and is inextricably linked with well-being. It is usually conceptualised as encompassing aspects of emotional (affect/ feeling), psychological (positive functioning), social (relations with others in society), physical (physical health) and spiritual (sense of meaning and purpose in life) well-being (Barry and Friedli, 2008).

In the context of school systems, well-being may be defined as: the presence of a culture, ethos and environment which promotes dynamic, optimal development and flourishing for all in the school

community. It encompasses the domains of relationship, meaning, emotion, motivation, purpose, and achievement. It includes quality teaching and learning for the development of all elements related to healthy living whether cultural, academic, social, emotional, physical or technological with particular focus on resilience and coping.

The focus of mental health promotion is on outcomes to strengthen people's sense of control, resilience, and the ability to cope with life's challenges (DES, HSE, DOH, 2013). Mental health difficulties occur along a continuum from developmentally appropriate, mild and more transient problems, to those of a more persistent and enduring nature which may warrant clinical investigation and support.

Mental health promotion in schools is about providing a full continuum of mental health promotion programmes and services in schools. These include enhancing environments, promoting social and emotional learning and life skills, preventing emotional and behavioural problems, identifying and intervening in these problems early, and providing intervention for established problems (Weist and Murray, 2008)

The Role of the Classroom Teacher

National and international research has consistently shown that the classroom teacher is the best placed professional to work sensitively and consistently with pupils to effect educational outcomes (Clarke and Barry, 2010; Payton et al. 2008; WHO, 2012) **The My World Survey (Dooley and Fitzgerald, 2012) found that the presence of one supportive adult in a young person's life is critically important to their wellbeing, sense of connectedness, self-confidence and ability to cope with difficulties. Over 70% reported that they receive support from one adult in their lives. Teachers are sometimes that "one good adult" acting as a powerful protective force in a child's life.** There is overwhelming evidence that students learn more effectively, including their academic subjects, if they are happy in their work, believe in themselves, their teachers and feel school is supporting them (Weare, 2000).

Our Whole School Approach to Mental Health Promotion

As well as the curriculum and pedagogic practice, our whole school approach involves the school environment and ethos, organisation and management structures, and relationships with parents and the wider community.

Our school leaders actively promote positive mental health and well-being in St. Patrick's GNS, Hollypark GNS. Our In-School Management team strive to raise awareness of mental health issues by creating a culture and climate which is accepting and supportive for staff, parents and students. Through nurturing quality relationships within the school we facilitate the well-being of staff members and students as well as fostering a shared responsibility for promoting positive mental health and well-being.

Our Whole School Approach involves:

- raising awareness of mental health promotion and well-being
- regular review and development of policies relating to well-being such as critical incidents, bullying and child protection
- professional development for school staff in mental health promotion

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- implementing the SPHE curriculum (NCCA, 1999) which includes a focus on whole school approaches to well-being and health promotion
 - implementing universal evidence based programmes/interventions
 - establishing school structures for supporting staff and students including support teams (care teams)
 - establishing mechanisms such as student councils to ensure that the voices of children are heard
 - planning, collaboration and appropriate sharing of information between schools when children are making the transition into primary school or moving into post-primary school liaising with appropriate external agencies and services eg NEPS psychologists, NCSE

Policy and Planning

All aspects of the school planning and self-evaluation processes in our school incorporate a health and well-being dimension. The physical and social environment reflects our commitment to taking care of the social and emotional needs of pupils, staff and visitors.

The teaching and learning of promoting positive mental health is addressed across the curriculum through:

- Aistear
- Physical Education
- RE
- SPHE
- Science
- SPHE Plan
- Code of Behaviour
- Child Safeguarding
- Critical Incidents
- Anti-bullying
- Acceptable Use Policy (social media)
- Special Educational Needs
- Support Teams
- Transition Planning
- Staff Support Structures
- Clear Pathways for help

In St. Patrick's GNS, Hollypark, we embrace the the "School Support for ALL" as a whole school approach that focuses on promoting positive mental health for all members of the school community. School Support for ALL is a process of prevention, effective mainstream teaching, early identification and intervention for children who are showing mild or transient signs of difficulty.

The Health Promoting Schools process outlined below provides a comprehensive approach for school self-evaluation in:

- Environment (physical & social)
- Curriculum, Teaching and Learning
- School Policy and Planning
- Partnerships (family and community links) (HSE, DES, 2013b).

A health promoting schools approach is a way of thinking and working that is adopted by all in the school to make it the best possible place to learn, work and play (Queensland, 2005).

Partnerships

In our school we engage with families and the local community to form supportive bonds and links. The following stakeholders collaborate:

- Parents/Guardians
- Local schools
- Voluntary/sports/arts groups
- State agencies
- Community groups
- Support services

Curriculum

In St. Patrick's GNS, Hollypark, we deliver an integrated curriculum that recognises the richness and uniqueness of the individual and the importance of the quality of teaching and learning experiences. Social, Personal and Health Education is central to pupil development in its broadest sense and is an essential part of school curricula. The physical and social environment in our school reflects the extent to which the school takes care of the social, and emotional needs of those who learn, work and visit.

Mental health awareness is addressed across the curriculum through:

- Aistear
- Physical Education
- RE
- SPHE
- Science

Effective and consistent delivery of SPHE as part of a whole school approach to mental health promotion is central to implementation. Central to School Support for ALL is effective implementation of an SPHE programme based on the curriculum.

Key characteristics of the SPHE programme delivered in our school include:

- a lifelong process
- a shared responsibility between family, school, health professionals and the community
- a generic approach
- based on the needs of the child
- spiral in nature
- developed in a combination of contexts
- engages children in activity based learning (NCCA 1999).

SPHE encompasses the development of emotional literacy which is the ability to understand emotions, listen to others and empathise. This includes provision of safe, secure and comfortable environments that enable children to share their concerns.

Interventions

In the event of a child presenting with mental health concerns, which are above and beyond the capacity and ability of the school to provide adequate support, the school may decide upon either of the following courses of action:

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- Follow existing policies which enables staff to access and refer directly to an external service In St Patrick's GNS, Hollypark, we have established essential relationships with local agencies and have names and contact details readily available for onward referrals
 - When deemed necessary, the school team, with the consent and collaboration of parents/guardians, may recommend a referral to the local general practitioner (GP) or other appropriate professionals who can advise on referral pathways. For children with mental health difficulties, the referral will likely be made to the local HSE psychology service/primary care team or the child and adolescent mental health services (CAMHS).

Staff CPD and Well Being

In St. Patrick's GNS, Hollypark, the school management team prioritise professional development for school staff in mental health promotion for staff and students. Whole-staff professional development for in our school includes a focus on the following:

- identifying and building upon existing good practice in the consistent whole-school implementation of SPHE
- providing a shared understanding of the mental health and well-being of young people
- developing an understanding of child development
- exploring the factors that impact both positively and negatively on mental health and well-being
- providing opportunities for reflection on the school environment, classroom and whole school practice to establish and maintain healthy patterns of relationships
- raising awareness of the importance of consistency between home and school environments in the implementation of strategies and programmes which promote mental health.
- considering the implementation of supportive practices in addressing and resolving conflict and other issues arising between children
- raising awareness of the links between risk taking behaviours, bullying and the development of mental health problems
- exploring strategies to develop children's skills, attitudes and behaviours in dealing with peer pressure, bullying situations or situations involving risk
- equipping teachers to develop their own and children's resilience, self-control and coping skills in a variety of social situations.

Our school is a safe and supportive environment for staff members. All staff members are supported in maintaining their personal health and well-being. Our staff benefit from reflecting together on their own well-being and their general attitudes to mental health. All staff are made aware that individual teachers requiring additional support at a particular time may access the Employee Assistance Service. Further information can be accessed at www.carecall.ie or telephone: 1800 411 057.

Appendix A: A mental health protective factor/ A mental health risk factor

A mental health protective factor is an internal (e.g. temperament) or external (e.g. environmental) condition that protects positive mental health enhances the capacity to cope and reduces the likelihood that a mental health problem or disorder will develop (DES, HSE, DOH, 2013). In the school setting mental health protective factors include:

- positive relationships with peers and teachers
- positive mental health of school personnel
- participation in school and community activities
- opportunities for skills development and achievement
- recognition of contribution, effort and achievement
- sense of security
- a positive school climate
- a sense of belonging and connectedness to schools
- effective school policies related to mental health
- protocols and support systems that proactively support children and their families should difficulties arise
- positive classroom management strategies
- sharing acquired knowledge and positive behaviour management practices with parents
- fostering expectations of high achievement and providing opportunities for success
- opportunities for social and emotional learning and the development of problem solving skills
- support and professional development for teachers.

Protective factors build and enhance resilience in children and are a stronger predictor of positive outcomes for children than exposure to risk factors (Cooper, Jacobs, 2011)

A mental health risk factor is an internal or external condition that increases the likelihood of a mental health problem. In the school setting mental health risk factors include:

- disengagement, absenteeism, isolation and alienation
- bullying and relationship difficulties
- low academic achievement
- violence/aggression - harsh and inconsistent discipline.
- learning disabilities
- cultural differences
- low self-esteem
- stressful life events
- difficult school transitions
- poor connection between family and school

Appendix B: Students at risk of Self-Harm or Suicide

Supporting children who are at risk Incidents of self-harm and death by suicide are infrequent in primary schools. However, if there is a concern about a child in relation to suicide/ self-harm, the most appropriate response is to ensure that action is taken by the school that will lead to the provision of appropriate support for the young person.

The following approach is recommended:

- parents/guardians should be contacted immediately in all cases
- in the case of a concern about suicidal ideation or self-harm, a referral to the child's GP is recommended
- a trusted staff member should offer support in a sensitive and appropriate manner to allow the child to talk about his or her experience or thoughts (cognisant that it is inappropriate to question a children if there are child protection concerns)
- schools are advised to consult Responding to Critical Incidents: Resource Materials for Schools (NEPS, 2015a) which provides advice to guide interventions and necessary actions should concerns arise
- schools may also consult with the NEPS psychologist and relevant HSE personnel if there are general concerns about self-harm or suicide within the school setting

Response to an Unexpected Death

School's response in the aftermath of a critical incident/unexpected death: Some schools may be faced with the reality of dealing with a critical incident and/or tragic death. A critical incident is any event or sequence of events that overwhelms the normal coping systems within a school (NEPS, 2015b). In order to respond appropriately, it is vital that schools have a critical incident policy, plan and team in place. This will ensure a structured and orderly approach to dealing with any such incident. Support services may also be accessed from voluntary and statutory agencies. Responding to Critical Incidents Guidelines for Schools (NEPS, 2015b) provides a useful framework for preparation in advance of an incident occurring.

Supporting a child's return to school

Careful consideration needs to be given by school management to planning for re-integration where a child has been absent from school for a period of time because of family trauma or mental health concerns. There is a need to:

- acknowledge the child's difficulties and provide reassurance that relevant supports will be organised
- take account of the child's ability to participate in general school activities and routines
- agree on an appropriate communication system between parents/guardians supporting teachers and the external agencies if appropriate
- discuss and agree on issues related to confidentiality with parents and staff
- consider carefully the information provided by the professionals involved
- assign a supportive and sensitive staff member who has a positive rapport with the child
- ensure that the assigned staff member has collegial staff support in carrying out this role
- parents/guardians need assurance that they will be contacted should issues of concern arise
- ensure that relevant staff understand that a young person should not be defined by difficulties/diagnosis.