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education services

Emotional Health and Wellbeing Pathway

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Introduction

What we know about children and young people's emotional health and wellbeing

'Wellbeing is about feeling good and functioning well' (Department of Health, 2014)

Although many of the children and young people in our schools enjoy good emotional health and wellbeing, there are too many for whom this is not the case. A growing body of evidence indicates the issues faced by today's children:

- 1 in 10 children and young people aged 5-16 years have a diagnosable mental health disorder (Mental Health Foundation, 2015). This figure rises to 1 in 5 young adults (Young Minds, 2018).
- Out of 15 countries surveyed on aspects of subjective well-being, children in England ranked 15th for self-confidence and 14th for life satisfaction (The Children's Society, 2015).
- Almost 1 in 4 children and young people show some evidence of mental ill health (including anxiety and depression) (Young Minds, 2018).
- 1 in 12 young people deliberately self-harm at some point in their lives (Young Minds, 2018).
- 50% of adult mental health problems begin by the age of 14 (Kessler et al, 2005).
- Many children and young people communicate their emotional difficulties through persistent, disruptive behaviours (Colley, 2017). Persistent, disruptive behaviour is the most common reason for exclusion in England: 36% of permanent and 28% of fixed term exclusions (Department of Education, 2018).
- Young people's happiness is at its lowest since 2010 according to ongoing research into children's self-reported wellbeing (The Children's Society, 2017).

Impact of emotional health and wellbeing on educational outcomes

In 2015 the Department of Education reported on research showing that emotional health and wellbeing has a significant impact on educational outcomes. The key findings of this research were:

- Children with higher levels of emotional, behavioural, social, and school wellbeing, on average, have higher levels of academic achievement and are more engaged in school, both concurrently and in later years.
- Children with better emotional wellbeing make more progress in primary school and are more engaged in secondary school.
- Children who are bullied are less engaged.
- Children with positive friendships are more engaged.

National education policy and guidance

Growing concerns about children's mental health and research showing the impact on educational outcomes have resulted in emotional health and wellbeing increasingly being recognised in national educational policies and guidance. The crucial role schools and their workforce have to play in this area has been reinforced in a number of reports and guidance documents in recent years:

- The Ofsted common inspection framework (2015) now requires schools and other settings to evidence pupils' personal development, behaviour and welfare. This includes evidence of learning about emotional health, managing feelings and behaviour and the prevention of bullying, discrimination and prejudiced behaviour.
- In 'Future in Mind: promoting, protecting and improving our children and young people's mental health and wellbeing', the Department of Health set out its aspiration that by 2020 professionals working with children and

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young people will be 'trained in child development and mental health, and understand what can be done to provide help and support for those who need it' (Department of Health & NHS England, 2015).

- The Department for Education has produced guidance which 'clarifies the responsibility of the school, outlines what they can do and how to support a child or young person whose behaviour, whether it is disruptive, withdrawn, anxious, depressed or otherwise may be related to an unmet mental health need.' This guidance 'provides advice and practical tools to help schools promote positive mental health in their pupils', (Department for Education, 2016).
- The Values-Based Child and Adolescent Mental Health System Commission (2016) advocate the need to:
    - Recognise the role of schools and fund them appropriately.
    - Ensure that both school and education policy and wider government policy and legislation are not detrimental to children and young people's mental health.
    - Help schools to develop a framework for empowering and enabling children and young people to better understand their own mental health and to advocate for themselves. Schools should be able to teach children and young people about mental health in the same way they teach them about literacy or numeracy.
    - Ensure that schools are able to identify mental health issues and can easily signpost pupils to relevant support, either within the school or their local community, and have the accountability to do this.
- The Education Policy Institute (2016) highlight 'the critical role of teachers in early identification of mental health symptoms and helping children to build resilience' and call for:
    - Evidence-based mental health training to be a part of initial and in-service training for teachers.
    - A trained lead for mental health and wellbeing in every school, alongside a lead school governor for wellbeing.
    - Pupil involvement in designing in-school support.
    - Ofsted having regard to mental health in any inspection of a school or college.
- Most recently the government has launched a green paper entitled 'Transforming children and young people's mental health provision' (Department of Health & Department of Education, 2017). This paper outlined proposals for every school to have a designated lead in mental health by 2025. Additionally they proposed that mental health support teams would be linked with groups of schools and colleges, offering individual and group help to young people with mild to moderate mental health difficulties. These teams would also work with designated mental health links and provide a connection to specialist services. The government's response to the consultation in July 2018 indicates that a trailblazer approach will be employed to trial the first mental health support teams and training will be delivered to 20% of schools' designated leads for mental health in 2019 (Department of Health and Social Care & Department for Education, 2018).
- Alongside this approach, the government has recently launched a consultation about their plan to make health education (including mental wellbeing) compulsory in schools from 2020 (Department for Education, 2018), with exemplar materials available from 2019.

The local context

Worcestershire's transformation plan for children and young people's emotional wellbeing and mental health

The different organisations across Education, Health and Social Care in Worcestershire are committed to working together to improve outcomes for children and young people's emotional wellbeing and mental health.

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In 2015 Worcestershire produced a Transformation Plan for Children and Young Peoples Emotional Wellbeing and Mental Health based on the recommendations from 'Future in Mind: promoting, protecting and improving our children and young people's mental health and wellbeing' (Department of Health & NHS England, 2015). The transformation plan addresses the key themes outlined in Future in Mind:

- Promoting resilience, prevention and early intervention
- Improving access to effective support: a system without tiers
- Care for the most vulnerable
- Accountability and transparency
- Developing the workforce

The 2017 update of the plan can be viewed online:

http://www.worcestershire.gov.uk/downloads/file/9000/worcestershire_transformation_plan_for_children_and_young_peoples_emotional_wellbeing_and_mental_health

Initiatives arising from this plan have directly impacted on the support available for children and young people and for the educational settings supporting them. These include:

- Youth Mental Health First Aid and Self Harm and Young People training for professionals
- New county-wide services to support children and young people's emotional wellbeing for instance CAMHS CAST
- An emotional wellbeing toolkit for schools and colleges

Emotional wellbeing toolkit

The Emotional Wellbeing Toolkit has been developed by Worcestershire County Council with the support of local educational practitioners in partnership with Babcock Prime. It provides a quick guide to best practice in schools using a checklist and signposting to supportive resources and approaches, along with information about when and how to access further support if needed. This toolkit supports schools and colleges to audit their provision in order to maintain an emotionally healthy learning environment and to respond effectively to any emotional or mental health difficulties experienced by staff or students. It guides them to use a 'whole school or setting approach', for example, by:

- Teaching about mental health and resilience through the taught curriculum
- Developing strong policies for staff and pupils, such as anti-bullying and diversity policies
- Asking pupils and learners what they need and listening to their concerns
- Promoting staff wellbeing
- Making sure pupils can get help from specialist services outside the school or college if they need it.

The toolkit covers best practice as described in national guidance documents covering the following eight areas:

- Leadership and management
- Ethos and environment
- Curriculum, teaching and learning
- Enabling the student voice
- Staff development
- Understanding need, planning interventions and monitoring impact
- Working with parents and carers
- Targeted support and appropriate referral

The Emotional Health and Wellbeing Toolkit can be accessed online:

http://www.worcestershire.gov.uk/downloads/download/1151/emotional_wellbeing_toolkit

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Worcestershire's Emotional Health and Wellbeing Pathway

This document, Worcestershire's Emotional Health and Wellbeing Pathway, has been developed as part of the local area response to the growing concern about the emotional health and wellbeing of children and young people.

The pathway provides information for schools to help guide their identification, planning and provision for children and young people who are experiencing difficulties in this area, as well as advice about how to establish a whole school environment in which all staff and pupils 'feel good and function well'.

It also includes information about referral pathways to external agencies for children who, despite intervention, continue to show signs of mental health and/or emotional health and wellbeing difficulties.

Typical social and emotional development

Accurate identification of children and young people with emotional health and wellbeing difficulties is dependent on a good understanding of typical development. The table below provides information about the stages that children typically progress through as they grow. It is important to note that no one child will demonstrate every one of the behaviours and traits listed. Children develop at different rates and may exceed age related expectations or be delayed in some areas. Where a pattern of delay in reaching age related expectations occurs this can be a cause for concern. Conversely, where sexual behaviours expected of an older child are demonstrated, consideration should be given as to whether this indicates safeguarding concerns and whether professional advice should be sought.

Birth to Three Years		
Age of development	**Social characteristics typically seen at this age**	**Emotional characteristics typically seen at this age**
0-6 months	• Baby settles when parent comforts • Toddler seeks comfort from parent • Exploration from a safe-base 5 months: • Responsive to social stimuli, facial expressions of emotion	Birth to 1 year: • Learns fundamental trust in self, caretakers and environment
6 - 12 months	9 months: • Socially interactive, plays games with caretakers 11 months: • Stranger and separation anxiety, solitary play	

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Birth to Three Years		
1-3 years	2 years: • Imitation, parallel and symbolic play	12-18 months: • "Terrible twos" can begin, wilful, stubborn, tantrums 1-3 years: • Mastery of body and rudimentary mastery of environment (able to get others to meet his or her needs) 18-36 months: • Feel pride when they are "good" and embarrassment when they are "naughty" • Can recognise distress in others (beginning of empathy) • Emotionally attached to toys or objects for security

Pre-school		
Age of development	**Social characteristics typically seen at this age**	**Emotional characteristics typically seen at this age**
Pre-school	• Play is cooperative, imaginative; may involve fantasy and imaginary friends • Takes turns in games • Experiments with social roles, wants to please adults • Incorporates parental prohibitions; feels guilty when disobedient • Simplistic idea of "good and bad" behaviour • Curious about bodies, touches own genitals • Little sense of privacy • Primitive, stereotypic understanding of gender roles	• Increasing ability to control emotions, fewer emotional outbursts • Increased frustration tolerance • Better delay gratification • Rudimentary sense of self • Understands concepts of right and wrong • Self-esteem reflectsopinions of significant others • Curious • Self-directed in many activities

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Primary School Age		
Age of development	**Social characteristics typically seen at this age**	**Emotional characteristics typically seen at this age**
	• Friendships are situation specific • Understands concepts of right and wrong • Rules relied upon to guide behaviour and play, and provide child with structure and security	• Self-esteem based on ability to perform and produce • Alternative strategies for dealing with frustration and expressing emotions • Sensitive to others' opinions about them
5-6 years	• Believe rules can be changed	6-8 years: • Have questions about pregnancy and intercourse • Use of sexual words
7-8 years	• Strict adherence to rules	
9-12 years	9-10 years: • Rules can be negotiated • Beginning to understand social roles • Regards social rules as inflexible • Can adapt behaviour to fit different situations • Takes on more responsibilities at home • Less fantasy play, more team sports, board games • Self -interested exchanges	9-12 years: • Interest in nude pictures in books or magazines • Talk about sex information with friends of the same sex • Sexual swearing • Exhibitionism e.g. mooning • Playing games with children their own age that involve sexual behaviour e.g. strip poker, truth or dare • Beginnings of sexual attraction to/ interest in peers • Relationships may involve flirting, kissing, touching, holding hands

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Adolescents: Secondary Age Pupils		
Age of development	**Social characteristics typically seen at this age**	**Emotional characteristics typically seen at this age**
12-14 years	• Psychologically distance self from parents • Identify with peer group • Social status largely related to group membership • Social acceptance depends on conformity to observable traits or roles • Need to be independent from all adults • Ambivalent about sexual relationships • Exploratory sexual behaviour	• Self-conscious about physical appearance and early or late development • Body image rarely objective • Emotionally labile • May over-react to parental questions or criticisms • May engage in activities for intense emotional experience • Risky behaviour • Blatant rejection of parental standards • Rely on peer group for support
15 – 17 years	• Friendships based on loyalty, understanding, trust • Self-revelation is first step towards intimacy • Conscious choices about adults to trust • Respect honesty and straightforwardness from adults • May be sexually active • Understand morality as conformity with law as necessary for good of society	• Examination of others' values, beliefs • Forms identity by organising perceptions of their attitudes, behaviours, values into coherent 'whole' • Identity includes positive self-image • Additional challenges with identity formation include ethnic minority or mixed heritage status, being an adopted or looked after child and LGBTQ identity

Reference material includes: Developmental Milestones Chart, the Institute for Human Services for The Ohio Child Welfare Training Program (October 2007)

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Factors affecting emotional and social development

There are many events, attitudes and experiences that a child or young person may encounter at some point in their lives which may have a short term negative impact on their well-being, causing feelings which can be overwhelming and distressing. Additionally, research has shown that some factors are associated with risk of problems with emotional health and wellbeing in the longer term.

Not all children that experience challenging situations and risk factors will go on to develop difficulties with emotional health and wellbeing however. Protective factors have also been identified which are associated with greater resilience and ultimately better lifetime outcomes.

Situations which may impact on emotional health and wellbeing

- Cultural norms and conflicting pressures from family and peers
- Peer group norms and the pressure to fit in
- Impact of current events such as racial or terrorist attacks
- A growing awareness of themselves and others as sexual beings
- Bullying (physical, verbal or cyberbullying)
- Exposure to digital information and resources which are hard to escape and may contribute to an inaccurate perception of risk in society and a distorted perception of what is the 'norm'

Risk factors for longer term difficulties with emotional health and wellbeing

- Loss, for example bereavement or loss of home
- Illness/disability, for example foetal alcohol syndrome
- Family context and parenting style
- Economic deprivation and limited aspirations
- Trauma and/or experience of distressing event
- Abuse and neglect
- Learning difficulty
- Communication difficulty
- Limited experience of social and emotional learning opportunities

Protective factors

- Economic security
- Empowerment
- Feelings of security, mastery and control
- Positive interactions with others

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- Physical activity
- Stable and supportive family
- Healthy diet and lifestyle

The role of schools in supporting emotional health and wellbeing

Schools have a significant role to play in supporting the emotional health and wellbeing of students. National policy and guidance recognises the importance of whole school approaches to wellbeing for all (universal provision), alongside targeted intervention and provision for 'at risk' groups and pupils showing early signs of difficulty. The importance of transparent referral routes and information about the role of external specialist services in supporting schools and pupils where difficulties persist is clear.

This section of the Emotional Health and Wellbeing Pathway outlines what schools can do to meet pupils' needs at these three levels, universal, targeted and specialist, creating an environment which promotes wellbeing for all.

Pupil voice

Feelings of empowerment, mastery and control have been found to be protective in stressful and challenging situations, increasing resilience. Schools which prioritise authentic pupil participation activities give voice to these protective factors.

The benefits of listening to children also include increased participation in their learning, confidence and self-respect and preparation for citizenship as adults. From an emotional perspective the opportunity for meaningful self-expression can help early identification of potential difficulties, allowing effective interventions to be put in place before difficulties escalate.

Children and young people should feel respected and valued within the school community and regarded as an equal part of it. They need to have ongoing opportunities for a purposeful dialogue, which can influence all aspects of their school day. This should be embedded within a whole school approach, involving all staff and pupils and not simply a one off activity.

The responsibility to ensure that pupil voice work is embedded in schools is set out in The United Nations Convention on the Rights of the Child which states that:

> *'Every child has the right to express their views, feelings and wishes in all matters affecting them, and to have their views considered and taken seriously.'*

Schools have specific responsibilities for ensuring the voices of vulnerable pupils are heard. As an example the Special Educational Needs Code of Practice (2015) states that whenever possible, children and young people with special educational needs should 'participate in all the decision-making processes that occur in education'.

The following strategies will help schools to build on their capacity to have meaningful participation and communication with children. It is important to recognise that as well as providing opportunities for authentic participation, children and young people will often need support to learn the skills they need to formulate and communicate their views effectively, particularly if they are experiencing emotional health and wellbeing difficulties.

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Strategies to encourage pupil voice

	Strategies	Key adults involved
Universal	• Active school council with wide representation • Pupil governors • Surveys and questionnaires • Discussion and working groups • Review and feedback to pupils to tell them how their involvement has made a difference • Extend opportunities to those in vulnerable groups with support • Age appropriate opportunities for children to make decisions which will affect their future • Pupils actively engaged in discussing, reviewing and evaluating emotional health and wellbeing provision in their school • Peer group support • Listening and befriending programmes • Peer mediation • Suggestion box and decision making ideas • E-surveys and e-discussion groups • Whole school approach to developing communication skills and citizenship	• All staff responsible
Targeted Support	• The use of screening and assessment tools which include self-report • Interventions targeting emotional literacy • Interventions targeting social skills and expressive language • Access to school counsellor or group interventions • Aids such as Widget symbols/picture cards for children with complex needs and communication difficulties • Communication passport • Confidential 'Bullying Box'	• Special educational needs support staff • Form tutors • Key workers • External agencies

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	Strategies	Key adults involved
Specialist Support	• Opportunities for 1-1 support from specialist services and professionals qualified in working with pupils who are unable to communicate their views, thoughts and feelings through conventional means due to their social, emotional and mental health difficulty or other special educational need or disability.	• CAMHS • Counsellors • Educational Psychologists • Specialist teachers • Social Services • SENDIASS Young Person Advisor

Working with parents and carers

Proactive work with parents and carers has been identified as one of the key features of schools which successfully promote pupils' emotional health and wellbeing.

Partnership working with parents is again most effective when it is part of a coherent strategy with work at the universal, targeted and specialist levels. At a universal level the aim of this work is about developing trusting relationships through engagement with parents and community groups.

Engaging parents and community groups

Engaging parents and the wider community can be hard work and resource intensive. Those who have had success in this area suggest the following strategies, but stress that they take time to develop:

- Appoint a senior manager or learning mentor to be responsible for home-school liaison.
- Hold class meetings for new parents and drop-ins for all parents.
- Provide lifelong learning opportunities on the school premises, drawing on a wide network of service providers.
- The school should be aware of the diversity in the parent/carer group and adopt approaches which reach out to all parents. There may be a need for extra encouragement or support to enable them to be actively involved; family learning initiatives for example. It may be helpful to have staff members from the same ethnic backgrounds and who speak the same languages as local communities.
- Promote the school and its achievements among local community groups.
- Provide opportunities for pupils to volunteer in the community, for example visiting care homes for older people.
- Have an environmental or conservation club working in the community.
- Distribute the school magazine in the community

Involving parents in work to support emotional health and wellbeing

There are a number of strategies which can be used to involve parents in whole school work on emotional health and wellbeing.

- Ensure that the taught emotional health and wellbeing curriculum includes activities which pupils can complete at home with their parents.

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- Share information about the school's approach to emotional health and wellbeing in accessible and engaging ways on a regular basis.
- Hold workshops for parents to attend on topics pertinent to the age of their child such as separation anxiety, supporting friendships and healthy use of social media.
- Although now archived by the Department for Education, the Family SEAL resource remains accessible online and can be a useful starting point for planning this work.

http://dera.ioe.ac.uk/8432/2/7bbb0741233b1ff0c48c1818336ec571.pdf

Working with parents whose children have emotional health and wellbeing difficulties

Parents and carers are the key to developing emotional health and well- being. They are experts on their own children, and can provide valuable information about the development of the skills of their child and to signpost for future development. It is essential that parents and carers are involved in any approaches used to support their child. Their views should be sought on initial planning and they should be kept informed throughout as the work develops.

It is important to recognise that some parents and carers will themselves have emotional health and wellbeing needs which may affect their capacity for supporting their child and developing their resilience. Since the reasons for their lack of confidence or self-esteem may be grounded in very practical issues around employment, housing or finance, there are opportunities to assist them by supporting access to community-based services.

Partnership with parents includes gaining their informed consent when for example an external professional such as an educational psychologist or specialist teacher is to be involved.

Gillick competency

The exception to needing parental consent is when the young person is not yet 16 but is in law, 'Gillick competent'. Under particular circumstances, children aged under 16 can give consent for medical intervention without the involvement of their parents. The situation that this most often applies to in schools is the provision of counselling.

In most cases, children and young people are willing to agree for a parent to be asked for written/verbal consent for them to receive counselling that will take place in school time. However in some cases they will request that their parents are not informed. In this case the school counsellor along with a member of school staff should assess whether the pupil is Gillick competent to make this decision. To be assessed as Gillick competent the young person must have:

- the ability to understand that there is a choice and that choices have consequences
- the ability to weigh the information and arrive at a decision
- a willingness to make a choice (including the choice that someone else should make the decision)
- an understanding of the nature and purpose of the proposed intervention
- an understanding of the proposed intervention's risks and side effects
- an understanding of the alternatives to the proposed intervention, and the risks attached to them and
- freedom from undue pressure

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The role of school staff in supporting the emotional health and wellbeing agenda

Schools want to provide teaching and learning environments which are effective and enjoyable where children and young people flourish. These depend on good staff and student relationships across the whole school. An understanding of well-being, mental health and resilience needs to be embedded throughout schools. The effective promotion of the emotional wellbeing of students requires all staff to have had sufficient training and professional development and to have a clear understanding of their roles and responsibilities. The emotional health and wellbeing of staff also needs to be a priority and planned for strategically at a senior leadership level rather than left to chance.

Roles and responsibilities

All members of school staff should understand their general responsibilities for ensuring the emotional health and wellbeing of their pupils. These will be established through safeguarding procedures, school policies and practices, the taught curriculum and specific emotional health and wellbeing initiatives.

School leaders and governors

School leaders and governors are responsible for ensuring that there is a clear vision for emotional health and wellbeing and that all aspects of school life effectively contribute to achieving this vision. This could include the following:

- The governing body and school leadership set a culture that values and includes all pupils enabling them to talk about problems in a non-stigmatising way
- Emotional health and wellbeing is referenced in school improvement plans and policies. Plans and policies are monitored and evaluated.
- Leaders promote equality of opportunity and diversity for pupils and staff, so that the ethos and culture of the whole school/setting prevents any form of direct or indirect discriminatory behaviour.
- Leaders, staff and pupils do not tolerate prejudiced behaviour and challenge any examples of such
- Leaders and staff have created a culture of vigilance where pupils'/learners' welfare is actively promoted. Pupils/learners are listened to and feel safe.

Strategic lead for emotional health and wellbeing

Strategic leadership of emotional health and wellbeing is essential to effective practice, and in coming years will be subsumed within the role of the designated mental health lead described in the green paper 'Transforming children and young people's mental health provision'.

The proposals suggest that the designated lead for mental health:

- oversees the help the school gives to pupils with mental health problems
- helps staff to spot pupils who show signs of mental health problems
- offers advice to staff about mental health
- refers children to specialist services when needed

Prior to these changes, schools are encouraged to consider their arrangements and to ensure that these are effective. Schools may choose to include these responsibilities within the role of a special needs coordinator, inclusion coordinator or pastoral lead. The strategic lead for emotional health and wellbeing should be part of the senior leadership of the school.

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Form tutor/ class teacher

The role of the form tutor in secondary education and class teacher in primary education is central to ensuring the emotional health and wellbeing of pupils. The form tutor/ class teacher is often the member of staff who sees a child or young person most regularly and may be the only staff member to spend 'non curriculum' time with the pupil. The role includes caring for students and, crucially, monitoring their progress both academically and socially, along with encouraging involvement, commitment and high standards of work and behaviour. The form tutor/ class teacher should be active in looking after the interests of the 'whole child' and should understand and be aware of how to identify areas of concern with regard to their development and the school policy for responding to these concerns.

Developing competency in emotional health and wellbeing

'A teaching profession that feels sufficiently trained to speak about mental health and approaches issues confidently would lead to an open and inclusive culture that would benefit students and teachers, and reduce stigma about discussing mental health in the classroom.' Young Minds (2017)

The provision of training and professional development activities focused on emotional health and wellbeing is key to improving staff confidence, understanding and skills. This professional development should aim to:

- Help each member of staff understand how responsibility for emotional health and wellbeing is a part of their role and the support available to them in school to ensure they carry out these responsibilities effectively
- Enable members of staff to identify the early signs of mental health problems
- Ensure staff members know how they can promote good emotional health and wellbeing for all students and how they can support those who are having difficulties

The government will be commencing training for designated leads for mental health in 2019, supporting 20% of schools initially. Locally, training commissioned in 2018/2019 through Worcestershire's transformation plan is available to schools in Youth Mental Health First Aid and Self Harm and Young People. Information about Youth Mental Health First Aid training is available at https://mhfaengland.org/mhfa-centre/programmes/national-schools-programme. Training in mental health specific topics is also available from CAMHS CAST.

Education partners to Worcestershire County Council, Babcock Prime also have a mental health offer which includes training, consultation and supervision for staff.

Appropriate supervision of school staff working with children and young people with emotional health and wellbeing difficulties is essential for effective and safe practice.

Ideally supervision should be delivered by a professional with training in supervisory skills, who also has expertise and experience of children and young people with difficulties in this area.

Supervision is particularly important for staff with a high level of pastoral responsibility as part of their everyday work, for example learning mentors and teachers running nurture groups.

Staff wellbeing

If staff members are to support the emotional health and wellbeing of pupils they have to feel supported to develop and maintain their own emotional health and wellbeing. School leaders need to take this seriously, and should consider the following questions:

- Are staff who work with the most vulnerable or challenging pupils provided with supervisory support and access to counselling services?
- Is there an open and respectful climate in which staff can admit and explore any concerns and difficulties, problem solve collaboratively and seek help and support?
- Do staff have access to advice from experts which provides assistance to them personally, such as health screening, financial advice, and careers advice?

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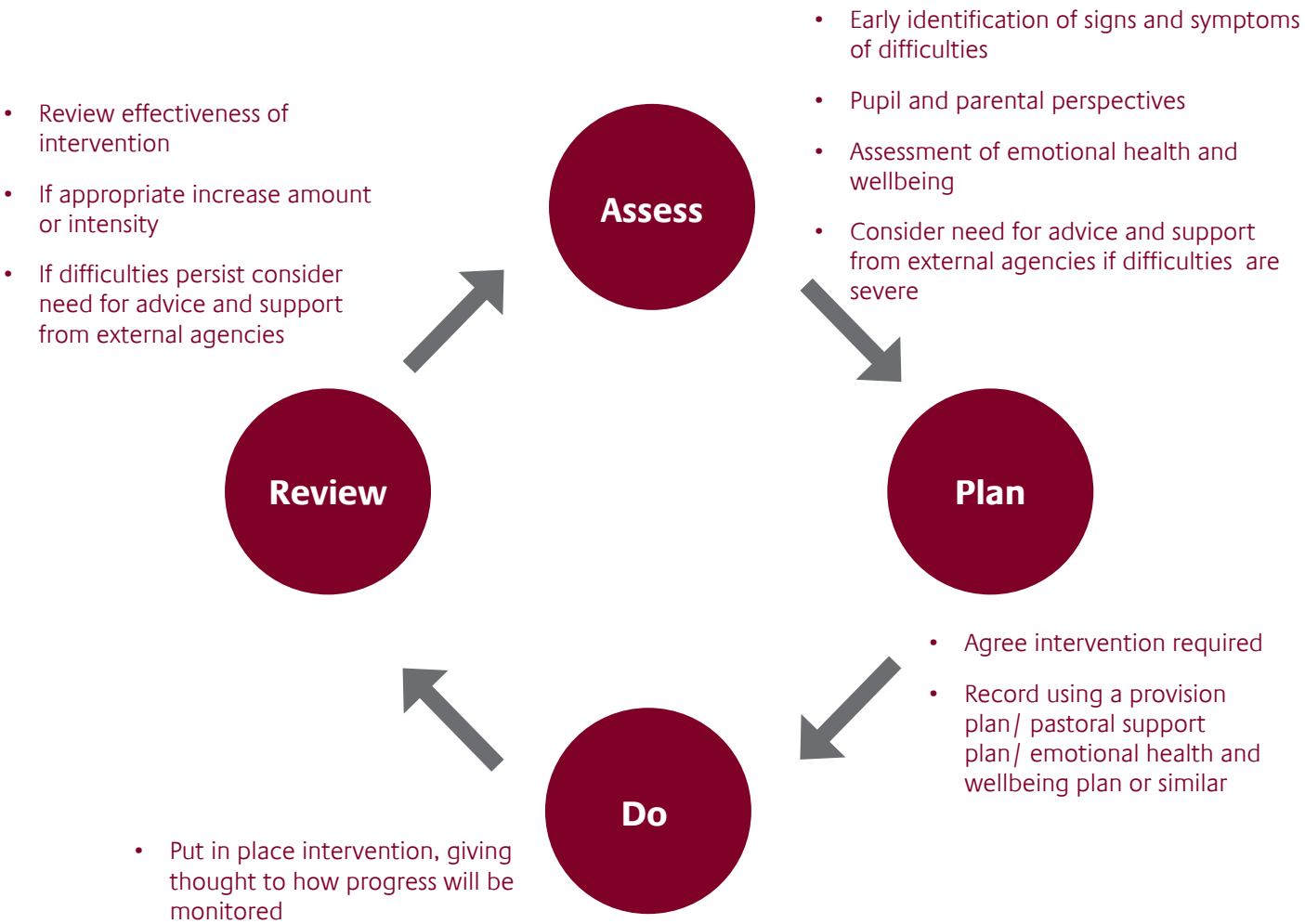
- Do external experts offer sessions in emotional health and wellbeing topics such as health and fitness, stress management relaxation?
- Is there an effective behaviour management system in place to support staff and reduce stress?
- Do the staff have the opportunity to celebrate successes and achievements with each other?
- Are staff consulted on their training and support?
- Are staff involved in key decision making processes?
- Are staff regularly surveyed to assess their levels of satisfaction and contentment?

Understanding need, planning interventions and monitoring impact

Schools need systems in place to ensure that difficulties with emotional health and wellbeing are identified early and interventions put in place to meet these needs. The effectiveness of these interventions needs to be evaluated and where appropriate, changes made to either increase the amount or intensity of support provided or involve external professionals in thinking about what the child requires. This 'assess plan do review' cycle is known as the graduated approach for children and pupils with special educational needs and is equally applicable to concerns about emotional health and wellbeing.

The assess plan do review cycle applied to emotional health and wellbeing



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Tools to support identification and assessment of emotional health and wellbeing difficulties

Assessment	Who is it for?	What is measured?	How is it measured?	Who can administer it?	Strengths
Boxall Profile	Primary and secondary aged pupils with social emotional behavioural difficulties	Social, emotional, behavioural development	Two part checklist each consisting of 34 descriptive items	A member of the school staff who knows the child well	Easy to use Indicator for nurture programmes
Strengths & Difficulties Questionnaire (SDQ)	3-16 year olds	Psychological attributes	Questionnaires completed by parent or teacher. Self-completion form for adolescents.	Professionals in CAMHS and school staff	Suggests pathways for more specialist assessment Freely accessible on-line
B/G-Steem	Pupils aged 6-13 years old	Self-esteem	Questionnaire completed by the child with yes/no answers	Teachers, SENCOs, trained teaching assistants and learning mentors	Easy to administer and score Assists in the planning and evaluation of interventions
Emotional Literacy Assessment & Intervention	Primary and secondary versions: 7-11 years and 11-16 years	Emotional literacy: Self-awareness Emotional regulation Motivation Empathy Social skills	Includes optional teacher, pupil and parent questionnaires	SENCOs, teachers, school based professionals	Reassessment allows monitoring of progress impact evaluation Provides follow up activities for intervention programmes
Butler Self-image Profile	Children aged 7-11 years Adolescents aged 12-16 years	Self-image & self-esteem		Specialist teachers CAMHS professionals Psychologists	Quick and easy to administer Immediate visual profile
Pupil Attitude to Self and School (PASS)	Pupils aged 7-15 years	Assessment of pupil views and attitudes about school, teachers, attendance, curriculum, themselves as learners	A software assessment tool	Teachers & school based professionals	School focus 20 minutes to administer Monitors, tracks and evaluates learner progress

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Assessment	Who is it for?	What is measured?	How is it measured?	Who can administer it?	Strengths
Emotional and Behavioural Development Scales	Pupils aged 4-18 years	Behaviours towards peers and property, learning behaviours, social skills, emotional wellbeing, stability and control	50 item survey completed by pupil		School focus included
Rosenburg Self-esteem Scale	Adolescents upwards	Self-esteem	A 10 item scale questionnaire	Teachers and school based professionals	Easy to administer & score Accessible online
Resiliency Scales for Adolescents	Pupils aged 9-18 years	Mastery, relatedness, emotional reactivity	Three scales		
Talkabout	School aged pupils	Self-awareness Self-esteem Social skills	Interview, social skills assessment and self-assessment	School professionals	Widely available
Warwick Edinburgh Mental Wellbeing Scale (WEMWBS)	13 years +	Feelings and thoughts over the previous two week period	14 item scale questionnaire	Teachers and school based professionals	Can be used as a before and after measure
Beck Youth Inventories-2nd Edition	Pupils between 7 and 18 years	Distress levels in 5 areas: anger, anxiety, depression, self-image and behaviour	Scale indicating how often the child feels a certain way		Easy to administer Profile analysis

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Emotional health and wellbeing interventions

When planning to meet pupils' emotional health and wellbeing needs, the following strategies and approaches will be helpful in considering what is required.

Universal (for all pupils)

Culture, staffing and policy
• Supportive, inclusive whole school ethos (everyone in school feeling included, accepted, listened to and respected)
• Adherence to responsibilities described in the SEND Code of Practice (2015) and Equalities Act (2010) for students with special educational needs and disabilities and other protected characteristics
• Meaningful opportunities for pupils to express their views and needs and to have these valued and acted upon
• Partnership work with parents, carers and families in a respectful way that recognises and values diversity
• A whole school curriculum to develop social and emotional skills that is the responsibility of all staff
• A whole school curriculum which enables students to reflect on and make positive safe choices regarding social media, sex and relationships and substance use
• Whole school positive behaviour policy which includes understanding of possible underlying causes of inappropriate behaviour
• Inclusive environment to meet the needs of children and young people with a wide range of special educational needs and disabilities
• Nurturing approaches which are embedded in the school ethos
• A high level of staff competency in emotional health and wellbeing and access to effective and regular training
• Flexible approaches and understanding for pupil needs incorporated into the environment and teaching
• All staff trained in basic awareness of low mood, anxiety and attachment difficulties in pupils
• Designated lead for emotional health and well-being in the school
• Clear guidance understood by all pupils for what to do if they are worried about a friend's mental health or believe that they may harm themselves
• Clear links between the emotional health and well-being support and behaviour management procedures in the school to counteract the higher risk of exclusion for children and young people with mental health difficulties
• Information sharing protocols with external agencies and parents which are GDPR compliant
• Effective anti-bullying policy

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- Safeguarding systems and procedures are clear and effective
- Active promotion of materials, activities and messages which reduce the stigma of mental health difficulties
- Teaching assistants are effectively deployed to support access to learning and provide support during unstructured times
- Effective and inclusive rewards systems
- Well established relationships where children feel open to talk to an adult or peers
- Rest/exercise breaks provided during the day
- Opportunities provided for home work to be done during the school day
- Inclusive and accessible games/ activities provided on the playground at break times
- School trips and extra–curricular activities planned so that they are inclusive and accessible
- Importance of staff emotional health and well-being recognised and supported
- Resources which reflect diversity displayed around the school and used across the curriculum
- Clear classroom rules agreed by all students
- Use of respectful language in classroom by staff and children
- Supportive transition arrangements between classes and phases
- Family groupings / vertical tutor groups
- Designated quiet area (not used for sanctions)

Specific approaches

- Emotional logic (whole class)
- Themed weeks e.g. anti-bullying
- Circle time
- Mentoring
- Buddy systems
- Mindfulness

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Targeted (for some pupils)

Culture, staffing and policy
• Additional transition arrangements and programmes for vulnerable pupils • Drop in sessions available with professionals such as the school nurse, counsellor, mentor or other key adult. • Targeted use of play leaders and/or teaching assistants at social times • Designated areas and/or clubs which appeal to children and young people, which aim to reduce stress and have a higher adult: child ratio • Robust 'assess plan do review' processes for pupils with emotional health and wellbeing difficulties • Targeted extra-curricular activities on offer e.g. cycle club to provide and exercise to promote positive mental well-being and socialisation • Personalised home/school books to establish effective communication between home and school • Pre and post teaching sessions to address curriculum needs and allow access to curriculum • Physical environment and policies which take account of the needs of pupils questioning their gender identity and/or sexuality • Risk management procedures which ensure the safety and full inclusion of children and young people with recognised emotional health and well-being need
Specific approaches
• Interventions targeting emotional development e.g. Thrive, • Programmes and opportunities to build resilience • Reach4Wellbeing group intervention for pupils with anxiety • Nurture groups and programmes • Targeted buddy systems • Nurture groups • Emotional Logic (intervention) • Learning mentors • Lego Build to Express

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Specific approaches
• Cognitive behavioural approaches. • Sensory checklist e.g. https://www.sensorysmarts.com/sensory-checklist.pdf • Invitation to 'target' clubs e.g. book club, cycle cub • Talkabout • Circle of Friends • Time to think/talk programmes • Input for pupils on how to deal with exam stress • Signposting to kooth.com for online support

Specialist (for a few pupils)

Culture, staffing and policy
• Specific emotional health and well-being policy in place outlining support available for children and young people with recognised emotional health and wellbeing needs which require individual and/or specialist intervention with links to the following policies: Self harm, bereavement, safeguarding, critical incident, anti-bullying, behaviour management and equalities • Co-production in planning processes involving parents/carers, pupils and staff • Consent for counselling accepted from pupils where they are Gillick competent • Promotion and advertisement of external support services such as The Samaritans and Childline • Support for staff working with children and young people with recognised emotional health and well-being needs through regular supervision and problem solving sessions with a suitably trained and experienced professional • Targeted work with parents of children and young people with recognised emotional health and well-being needs through support groups, family support workers and signposting • Signposting for parents when they also have mental health needs • Knowledge of specialist services and provision available and the pathways to accessing this support

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Culture, staffing and policy

- Intervention with pupils on how to support a friend with recognised emotional health and well-being needs
- All professionals employed by school providing support and intervention for pupils with recognised emotional health and well-being needs are qualified, regulated and supervised
- Risk assessments in place for children and young people who self-harm and/or maybe at risk of suicide

Specific approaches

- Evidence based therapeutic support and intervention in school for example:
- cognitive behavioural approaches for students with anxiety or depression
    - play therapy,
    - music therapy
    - Lego based therapy
- Individual counselling
- Learning mentor, family support worker and/or parent support advisors through targeted support and daily check-ins
- Referral to and partnership working with external professionals for support, advice and/or intervention
- Alternative provision or Medical Education Team involvement for short periods when pupil unable to attend school

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Emotional Wellbeing and Mental Health Pathway

Emergency medical help needed to preserve life - recent overdose or dangerous self-harm. Police help may be needed if child has absconded expressing suicidal ideation.

What should the school/college do?

Call 999

Suicide risk? Follow WSCB guidance 'What to do if you believe a child or young person is at risk of suicide' http://westmidlands.procedures.org.uk/local-content/ykjN/suicide-prevention

Urgent mental health support may be needed for serious mental health crisis (e.g. psychosis), or serious weight loss and signs of an eating disorder.

(**NB:** children/young people with significant learning disabilities may express their mental health needs as aggressive behaviour - be prepared to contact the Police and refer to LD CAMHS for an urgent appointment via CAMHS-SPA).

What can the school/college do?

Significant weight loss should be assessed urgently by a GP first to rule out a physical cause. Contact **CAMHS-SPA** on 01905 768300 for advice and for a decision on the urgency of the mental health need. After 5pm, contact the **out-of-hours GP** service by dialling NHS 111

Safeguarding concern? If a child is in immediate danger contact the Police on 999. If a child or young person is in need of protection or safeguarding ring **Family Front Door** on 01905 822666. Out of office hours contact the **Emergency Duty Team (EDT)** 01905 768020. Then complete a **Cause for Concern** https://capublic.worcestershire.gov.uk/FamilyDoorPortal/HomePage.aspx

Specialist support to meet significant mental health needs: '...NEED FURTHER HELP'

A few children/young people will show signs of significant mental health problems that are impacting on activities of daily life, preventing them functioning within the norms for their age. These may be persistent and of a moderate to severe nature, causing significant difficulties with their achievement and relationships.

What can the school/college do?

Continue to use school-based interventions to support the pupil, following advice from the CAMHS **CAST** team **CAMHS CAST Service** discuss making a referral to specialist CAMHS. Consider referring to an Educational Psychologist.

Specialist CAMHS Single Point of Access (CAMHS-SPA): www.hacw.nhs.uk/camhs **Tel: 01905 768 300**

Worcestershire Healthy Minds : (from 16 years of age) www.hacw.nhs.uk/our-services/healthy-minds

Targeted support to meet additional needs: '...MAY NEED SOME EXTRA HELP'

Some children/young people show signs of emerging mental health problems and/or are struggling with their emotional well-being, with problems outside the normal range for their age or gender and of a mild to moderate nature. These will be starting to cause difficulties with their school work, friendships or family relationships.

What can the school/college do?

Be alert to signs of emerging emotional problems; use data and evidence-based tools to assess and identify pupils who need targeted school-based interventions (see good practice checklist in the emotional well-being toolkit). Use Single View of the Child system to see who else is working with the child or family. Refer to the school health nurse or school counsellor. Speak to **CAST CAMHS CAST Service**. Consider **www.Kooth.com** or refer to **R4W**

Reach 4 wellbeing (R4W) NHS service for face to face emotional wellbeing support: www.hacw.nhs.uk/starting-well/reach4wellbeing

Kooth.com Self-referral for on-line emotional wellbeing support and counselling: www.kooth.com

Universal level: '...COPING WITH LIFE'

Most children and young people thrive and cope with the 'normal' difficulties and challenges of life and of growing up. They usually cope with these through their own resilience, with the support of family and friends and of their school.

What can the school/college do?

Promote an emotionally healthy whole school environment, following the 8 areas of good practice in the good practice checklist within the school's emotional well-being toolkit.

Parenting advice or family support needed? www.worcestershire.gov.uk/familysupport

For Early Intervention Family Support complete Early Help Assessment (EHA) and send securely to EIFS via https://capublic.worcestershire.gov.uk/Chs_Portal/Home.aspx

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External support from agencies and organisations

Support from external professionals should be sought in the following circumstances:

- School based interventions have not resulted in sufficient progress in the difficulties experienced by the pupil
- The difficulties experienced by the pupil are beyond the expertise or experience of the school
- The difficulties experienced by the pupil are such that they are at risk of harm to themselves or others

In the event of safeguarding concerns schools should call the Family Front Door (01905 822 666).Information about safeguarding concerns is also available at the following web page: www.worcestershire.gov.uk/causeforconcern

Schools will need to familiarise themselves with the range of external support available for pupils. In Worcestershire support is currently available from NHS services such as CAMHS and CAMHS CAST and from Worcestershire County Council education partners, Babcock Prime. Support is also available from independent practitioners. Schools need to ensure that independent practitioners have suitable qualifications and experience for the work being undertaken and are registered with appropriate regulatory bodies such as the Health and Care Professionals Council or the British Association for Counselling and Psychotherapy.

Services supporting emotional health and wellbeing

Kooth

The Kooth.com website is open to children and young people in Worcestershire aged 11-19. The site is staffed by fully trained and qualified counsellors and is available until 10pm each night, 365 days per year. It is free, safe, confidential and provides a non-stigmatising way for young people to receive counselling, advice and support on-line.

https://kooth.com

Reach 4 Wellbeing (R4W)

R4W provides cognitive behaviour therapy-based group work for children and young people aged 5-19 with mild to moderate emotional and mental health difficulties that have not responded to school or setting based prevention and emotional wellbeing support. Typically their difficulties will be starting to impact on their functioning in the home or school setting, but their difficulties are not yet severe enough to require referral to specialist CAMHS.

http://www.hacw.nhs.uk/starting-well/reach4wellbeing/

ChatHealth

Young people aged 11-19 years can text their school health nurse with any questions around health and wellbeing and for confidential advice and support.

Text: 07507 331750

CAST (Consultation, Advice, Support and Training)

CAST sits within Worcestershire CAMHS (Child and Adolescent Mental Health Services). They work directly with professionals who are working with children and young people experiencing or at risk of experiencing mental health difficulties. The service offers consultation, advice, support and training which can be specifically tailored to suit the professional seeking the service. Schools are expected to evidence interventions tried and any current work, for example following guidance in the Emotional Wellbeing Toolkit when making a referral.

www.hacw.nhs.uk/our-services/childrens-community-health-services/camhs/cast/

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CAMHS

Worcestershire CAMHS is a specialist mental health service for children and young people under the age of 18, where the young person is presenting with moderate to severe mental health problems that are impacting on activities of daily life and preventing them functioning within the norms for their age. Their problems may be persistent and causing significant difficulties with their achievement and relationships. Examples of mental health problems seen include moderate to severe depression, anxiety, symptoms suggesting psychosis, eating disorders, suicidal ideation and significant self-harming behaviour that is affecting daily living activities.

Where symptoms are displayed mainly through behaviour, the referral should include information on what strategies and interventions have been put in place by other services and agencies prior to referral, in order to explain why the need is felt to be one related to the mental health of the child, rather than other factors in their life and environment.

Referrals may be accepted where there is co-morbidity of a high level mental health need with another issue such as a learning disability, neurodevelopmental disorder or substance misuse. Where a young person is referred following trauma, it is important to ensure that the young person is safe from further trauma and living in a containing environment.

Referrers wishing to discuss a specific referral in greater depth will be able to contact the single point of access, CAMHS-SPA, where they can speak with a CAMHS clinician for advice.

If an emergency Mental Health Act assessment is required for acute psychotic illness or imminent suicide risk, the young person's GP would need to request this from the duty Approved Mental Health Professional coordinator.

www.hacw.nhs.uk/CAMHS

CAMHS-SPA: 01905 768300

Worcestershire Healthy Minds: Mental health services for over 16s and adults

Healthy Minds supports people aged 16 or over who are experiencing problems such as stress, low mood, anxiety or depression. The service offers short courses, talking therapies and self-help information.

http://www.hacw.nhs.uk/our-services/healthy-minds/

Services from Babcock Prime

Mental health offer

Babcock Prime will be launching a specific mental health offer which will bring together all of its traded activities to support schools with the emotional health and wellbeing agenda in autumn 2018. This offer will complement the Emotional Health and Wellbeing Pathway and Toolkit.

This offer will be in addition to support from the individual teams below which will continue to be available.

https://www.babcockprime.co.uk/

Educational Psychology

Babcock Prime Educational Psychology Service is commissioned by Worcestershire County Council. The main statutory role is to provide psychological advice to the Local Authority when an Education Health and Care Needs Assessment (Integrated Assessment) is agreed for a child or young person. The Educational Psychology Service is also sometimes involved where transfer from mainstream to special provision is being considered for a child with an Education Health and Care Plan.

Babcock Prime's traded Educational Psychology Service can be purchased by any school college or early years setting. Work with emotional health and wellbeing may include direct assessment and/or therapeutic work with children and young people, support to staff and/or parents, strategic whole-school work and delivery of bespoke training and continuing professional development activities.

https://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/educational-psychology

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Medical Education Team

The Medical Education Team discharges the duty of the local authority in ensuring that arrangements are in place for learners who are unable to attend school because of their medical needs (including mental health difficulties). Support from the Medical Education Team ensures that pupils have appropriate and ongoing access to education whilst remaining on the roll of their school. The team consists of experienced teachers and teaching assistants who are skilled in teaching learners of statutory school age with a wide range of physical, emotional and psychological health needs.

https://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/medical-education

Autism/Complex Communication Needs Team

The Autism Team offers assessments to identify the underlying factors which may affect a child or young person's social and emotional development and the root cause of any anxiety, frustration, anger or distress. In addition, recommendations are made to address those difficulties including direct interventions which may include:

- Environmental adjustments
- Developing staff skills, knowledge and understanding
- Peer awareness and support
- Parent support and advice – workshops and on an individual basis
- Pupil awareness and specific interventions including:
- Cognitive behaviour therapy specifically for children and young people on the autism spectrum
- Emotional Literacy programmes
- Lego based therapy
- Mindfulness and other stress reduction activities
- Autism awareness programmes

https://www.babcockprime.co.uk/disadvantaged-and-vulnerable-learners/autism-complex-communication-needs-(ccn)

Websites

The following websites contain a wealth of information about emotional health and wellbeing and how educational settings can support this agenda.

Organisations supporting mental health:

www.youngminds.org.uk

www.childline.org.uk/

www.nspcc.org.uk

www.ncb.org.uk/

Whole school approaches to emotional health and wellbeing:

www.thriveapproach.com/

http://webarchive.nationalarchives.gov.uk/20110812101121tf_/http://nsonline.org.uk/node/87009 (SEAL materials)

www.emotioncoachinguk.com/

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www.mindfulnessinschools.org/

https://www.emotionallogiccentre.org.uk/

Recognition of school emotional health and wellbeing work:

www.acseed.org/

www.awardplace.co.uk/award/was

School counselling:

www.place2be.org.uk/

Trauma Recovery:

www.trc-uk.org/

Anti-bullying:

www.kidscape.org.uk/

Suicide in young people:

www.papyrus-uk.org/

Bereavement:

www.childbereavementuk.org/

www.winstonswish.org.uk/

Self harm:

www.selfharm.co.uk

Attachment:

https://www.bathspa.ac.uk/education/research/attachment-aware-schools/

References

Colley, D. & Cooper P. (2017). *Attachment and emotional development in the classroom: Theory and practice.* London: Jessica Kingsley Publishing.

Department for Education. (2015). *Special educational needs and disability code of practice: 0 to 25 years: Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities.*

https://www.gov.uk/government/publications/send-code-of-practice-0-to-25

Department for Education. (2015). *The impact of pupil behaviour and wellbeing on educational outcomes.*

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/219638/DFE-RR253.pdf

Copyright © Babcock Training Ltd [2018]. No unauthorised copying permitted.

Department for Education. (2016). *Mental health and behaviour in schools: Departmental advice for school staff.*

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/508847/Mental_Health_and_Behaviour_-_advice_for_Schools_160316.pdf

Department for Education. (2018). *Permanent and fixed-period exclusions in England.*

https://www.gov.uk/government/statistics/permanent-and-fixed-period-exclusions-in-england-2016-to-2017

Department for Education. (2018). *Relationships education, relationships and sex education (RSE) and health education: Guidance for governing bodies, proprietors, head teachers, principals, senior leadership teams, teachers. Draft for consultation: July 2018*

https://consult.education.gov.uk/pshe/relationships-education-rse-health-education/supporting_documents/Final%20DRAFT.%20JULY%202018_Relationships%20Education_RSE_Health%20Educ.._%20002.pdf

Department of Health.(2014). *Wellbeing: Why it matters to health policy.*

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/277566/Narrative__January_2014_.pdf

Department of Health & Department for Education. (2017). *Transforming children and young people's mental health provision: A green paper.*

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/664855/Transforming_children_and_young_people_s_mental_health_provision.pdf

Department of Health & NHS England. (2015). *Future in mind: Promoting, protecting and improving our children and young people's mental health and wellbeing.*

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/414024/Childrens_Mental_Health.pdf

Department of Health and Social Care & Department of Health. (2018). *Government response to the consultation on transforming children and young people's mental health provision: a green paper and next steps.*

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/728892/government-response-to-consultation-on-transforming-children-and-young-peoples-mental-health.pdf

HMSO. (2010). *The equality act.*

http://www.legislation.gov.uk/ukpga/2010/15/pdfs/ukpga_20100015_en.pdf

Kessler RC, Berglund P, Demler O, Jin R, Merikangas KR, Walters EE. (2005). *Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the national comorbidity survey replication. Archives of General Psychiatry, 62(6), 593-602.*

http://jamanetwork.com/journals/jamapsychiatry/fullarticle/208678

Ofsted. (2015). *The common inspection framework: education, skills and early years.*

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/717953/The_common_inspection_framework_education_skills_and_early_years-v2.pdf

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Royal College of Psychiatrists. (2016). *Values-based child and adolescent mental health system commission: What really matters in children and young people's mental health.*

http://www.rcpsych.ac.uk/pdf/Values-based%20full%20report.pdf

The Children's Society. (2015). *The good childhood report 2015.*

https://www.childrenssociety.org.uk/sites/default/files/TheGoodChildhoodReport2015.pdf

The Children's Society. (2017). *The good childhood report 2017.*

https://www.childrenssociety.org.uk/sites/default/files/the-good-childhood-report-2017_full-report_0.pdf

The Education Policy Institute. (2016). *Independent commission on children and young people's mental health, time to deliver.*

http://epi.org.uk/wp-content/uploads/2016/11/time-to-deliver-web.pdf

The Institute for Human Services for The Ohio Child Welfare Training Program. (2007). *Developmental milestones chart.*

http://www.rsd.k12.pa.us/Downloads/Development_Chart_for_Booklet.pdf

The Mental Health Foundation. (2015). *Fundamental facts about mental health.*

https://www.mentalhealth.org.uk/publications/fundamental-facts-about-mental-health-2015

Young Minds. (2017). *Wise up: Prioritising wellbeing in schools.*

https://www.youngminds.org.uk/media/1428/wise-up-prioritising-wellbeing-in-schools.pdf

Young Minds (2018). *Mental health statistics. Accessed 20/08/18*

https://youngminds.org.uk/about-us/media-centre/mental-health-stats/

United Nations. (1989). *Convention on the rights of the child*

https://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-11&chapter=4&lang=en

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Babcock Prime
Unit 1 Woodbury Lane
Norton, Worcester
Worcestershire
WR5 2PT

www.babcockprime.co.uk

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