Promoting Wellbeing and Mental Health in School Settings

Examples of nationally recognised best practice and examples of some programmes

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All the above examples are cited in:
Promoting children and young people’s emotional health and wellbeing – a whole school and college approach.

The one exception is the Thrive Approach. This is included to help understand the offer from the Thrive Approach which is different to Thrive Plymouth; the latter focusses on tackling health inequality in the city through primarily focusing on the following behaviours, improving diet, promoting active lifestyles, minimising alcohol related harm and preventing smoking. Improving emotional wellbeing and mental health is recognized as a significant area to address alongside the four behaviours.

Plymouth 2016
EPSOM DOWNS PRIMARY SCHOOL AND CHILDREN’S CENTRE

Epsom Downs Primary School, in Surrey, has an integrated day nursery, early years provision, primary school and family centre on site.

What do they do?

Taking a universal approach
Students are taught to embrace and value difference and this is incorporated into the curriculum wherever possible. Each year, they take an active role in Anti-Bullying Week - http://www.antibullyingweek.org/ where children across the Key Stages take part in workshops and activities that teach them to address diversity in a positive way.

The school encourages positive playtimes and so all pupils complete a Happy/Sad lunchtime tick-sheet which allows staff to track emotional wellbeing and look for signs of bullying or withdrawal. This helps children to be aware of how they feel and enables them to share this with their teachers. Children who are struggling to make friends may be assigned a lunchtime buddy or in more serious cases a Circle of Friends (team of support around the child) intervention may be organised via their Nurture Room service. An evaluation of this intervention found that it helped both pupils who were struggling and boosted the confidence of pupil who were involved in supporting their classmates. For more information about Circle of Friends, go to - http://www.autism.org.uk/working-with/education/educational-professionals-in-schools/resources-for-teachers/circle-of-friends-promoting-inclusion-and-interaction.aspx and http://www.inclusive-solutions.com/circlesoffriends.asp#books

Targeted provision
The NEST (Nurturing Emotional Security Together) is an early intervention group for key stage 1 children who have emotional and behavioural difficulties. The school made a large investment to develop this facility, which provides emotional support to KS1 children from across the North Downs Confederation area.

It is a separate unit providing intensive support for up to 7 children from local schools and is based at Epsom Downs School. Children will typically stay in the group for between two and four terms. The children spend their mornings in the unit and return to mainstream school in the afternoon.

Staff and parents can refer children to the service. The aims of the service are to

- To give children the support they need at the earliest possible age, to prevent learning problems later at school.
- To help children to behave appropriately, use their curiosity constructively, improve their self-esteem and develop confidence through close and trusting relationships with adults.
- To provide on-going assessment and support for children showing signs of emotional stress and/or behavioural difficulties in order to enable them to access the curriculum and participate fully in school life.
- To work in partnership with class teachers and parents to enable consistency of approach, both at home and at school.

There is an ongoing assessment process, which is fed-back to teachers and parents. The unit works in partnership with class teachers, and parents to ensure that there is a consistent approach to supporting these children, both at home and at school.
The NEST uses measures such as the Boxall profiles and the Strengths and Difficulties Questionnaire (SDQ) (see the section on measuring emotional wellbeing for more information) to assess the needs of the children referred to them. This provides essential insights into the child’s barriers to learning and is used to inform planning and interventions to support them.

**The Nurture Room** is run by two specially trained and experienced Emotional Literacy Support Assistants. They work with individual children or small groups and provide targeted support related to emotional and behavioural difficulties. Sessions for individuals are tailored to meet the needs of the child, and last for 6 weeks, with the child coming for half-hourly weekly sessions. The group sessions usually include children from the same year group, are run weekly in half-termly blocks. The sessions can last from 30 minutes to one hour depending on the age of the children. A structured programme is followed covering the social and emotional aspects of learning and behaviour.

**Delivering an Enhanced Enrichment Programme**
Outdoors learning including vegetable growing and animal care is used to promote emotional wellbeing. The school has a large enrichment programme, which allows children to develop other skills such as sports, crafts, creative writing, and bike maintenance. This enables children to shine outside of their compulsory school work.

They have a large allotment area, which enables children to grow vegetables, which are used in school meals or for healthy snacks. They also have a farm area where children learn animal care as part of their enrichment activities. These enrichment and afterschool activities including sports and creative activities give pupils a chance to develop new skills, have fun and socialize, and this further supports their emotional wellbeing.

**Involving families**
Class teachers, teaching assistants and other members of staff build relationships with parents and work hard to understand the sometimes complex family situations. If necessary staff can make a referral or recommendation to their on-site Children’s Centre - [http://www.epsomdowns.surrey.sch.uk/Our-Programmes/](http://www.epsomdowns.surrey.sch.uk/Our-Programmes/)

**Involving all staff**
All staff receive training, specifically around building skills related to behaviour, emotional or communication issues in children. Staff are trained in how to spot signs of emotional distress and are empowered to address them with a senior member of staff. Safeguarding training is delivered to all school staff and governors and staff running breakfast, afterschool and holiday clubs. The weekly staff meeting has a ‘Children Causing Concern’ section, which all staff are able to contribute to. The names of the children in question are then circulated in the meeting minutes and written on the board in the staffroom.

**How do they fund it?**
They have used Pupil Premium money to invest in mental health and wellbeing support for the school. They have invested in staff training, setting up the Nurturing interventions, a lunchtime fun club, buying in specialist support such as a play therapist, an EAL teacher and educational psychologist. Their largest investment was to build the NEST facility which provides emotional support to key stage 1 children from across the North Downs Confederation are.
They have recently invested in a new medical area which allows staff to monitor children more closely and administer first aid in a quieter and more relaxed environment.

**Contact for further information**
enquiries@epsomdowns.surrey.sch.uk

http://www.epsomdowns.surrey.sch.uk/
KINGS HEDGES EDUCATIONAL FEDERATION

Kings Hedges Educational Federation is a Cambridgeshire primary school and nursery for 357 pupils aged 3-11.

What is the need?
A higher than average proportion of students within the school are eligible for free school meals and almost half of the students have SEN and/or disabilities. The school is within one of the most deprived areas in England. All pupils complete a questionnaire when they first join the school and 45-55% were found to be disadvantaged through a lack of expressive language and who therefore cannot express their needs.

What do they do?
They try, in everything they do, to build resilience amongst their school population. Governors are selected who recognise the importance of mental health and as a result, their knowledge supports sound decision making, resource and awareness raising.

They have an induction policy for new staff, which makes their approach to wellbeing very clear. The commitment to emotional wellbeing is underpinned by rigorous policies and training in for instance, the identification of mental health difficulties in early year’s pupils, the impact of trauma on pupils and so on.

Prioritising early intervention
The school shows an exemplary commitment to pupil well-being both within and beyond the school community. It recognises the critical importance of early intervention and has both internal processes for working with families and innovative uses of external services and resources.

The school has good relationships with health visitors and children’s centres to identify families which may need support and children with mental health problems as they enter the school.

Prior to starting school, all children are visited at home. Home visits are valuable in gaining the parents’ perspective on the needs of the child and give the staff an insight to the child’s home and family life. Families complete questionnaires on entry to early years as part of a two-year FAB Project (Family Happiness and Wellbeing). This screening process identifies early signs of mental health problems.

Emotional wellbeing is prioritised within the PSHE curriculum. Pupils participate in weekly philosophy lessons to help develop an ability to express feelings and needs - http://www.kingshedgesprimary.org.uk/learning/pshe-and-philosophy/philosophy---good-work-examples They use yogabugs for early year’s pupils as a way to help them learn to relax - http://www.yogabugs.com/index.php?page_name=home Childline’s School Service visit annually to speak to pupils about keeping safe. This service uses trained volunteers who go into primary schools to talk to them about different type of abuse and ways to keep safe - https://www.nspcc.org.uk/what-we-do/the-work-we-do/childline-services/childline-schools-service/childline-schools-service_wda90513.html

The Pupils Voice
The pupil’s voice is valued and placed at the heart of the school’s decision-making strategies. The School Council are a group of elected children from year 1 to year 6. They work with the teachers and the Governors to ensure that the school is the best it can be.

The School council have addressed emotional wellbeing issues. http://www.kingshedgesprimary.org.uk/our-community/school-council#top
Pupils actively support healthy friendships and vulnerable pupils during playtime, through the provision of buddy stops and the lunchtime club -
http://www.kingshedgesprimary.org.uk/learning/pshe-and-philosophy/smsc---good-work-examples

Having someone to talk to

‘Talk Time’
The school has set up systems such as Talk Time, a school-funded drop-in where children can talk to a trained adult and get advice and help about their worries.

Blue Smile
The school has commissioned a local charity called Blue Smile -
http://www.bluesmileproject.org/index.php to provide a school based counselling service.
The school refers children who have more complex difficulties or emotional issues to this service. Blue Smile offers one-to one counselling and mentoring. The service uses a play and arts-based approach to help pupils develop better coping strategies and improves their school performance.

Blue Smile also offers volunteer mentors to those children and young people who do not meet referral criteria for counselling, but who are struggling with some emotional or behavioural issues and would benefit from support. The people who become volunteer mentors would have some experience of working with children, and may be in the progress of working towards a qualification in counselling. Mentors become a reliable adult in these pupils’ lives, listening to them, playing with them and helping them make sense of feelings. They are important role models who, by befriending a young person, help build self-esteem and motivate them to improve relationships and performance in school.

The Blue Smile counselling service uses a number of clinical outcome measures such as the Children’s Global Assessment Scale, which measures a child’s emotion and behavioural functioning; and The Strengths and Difficulties Questionnaire (SDQ); which helps screen for mental health problems; as well as in-house measures and academic records. They collect data at the beginning and at the end of the intervention and the data give them an indication of how well the service is helping the children, both in terms of their emotional and behavioural wellbeing, and their academic progress.

The data collected also gives the school an indication of the number of children accessing the service and the severity of their mental health problems. The school has used this data to increase the number of therapists and as a consequence increase the number of children who can access the service.

Addressing inequalities

‘So to Speak’
The school has set up ‘So to Speak’, working with a group of over 20 pre-school pupils who are demonstrating delayed or limited-speech development. The project aims to minimize the impact of disadvantage by improving factors around expressive language, separation anxiety and language deficit. The school closely monitors the development of these children and is already seeing that many are exceeding the progress of their peers.
http://www.kingshedgesprimary.org.uk/nursery-school/so-to-speak
Working with Families: The Red Hen Project
The Red Hen project is provided by a local charity which is based in the school. The project is managed by the school and works with families to address issues such as attendance problems, bullying, domestic violence, low self-esteem, family break-ups and family sickness illness or bereavement which may cause a barrier to learning - http://lisapeat.vpweb.co.uk/default.html

The ‘Red Hen Project he school provides home-school workers who build relationships with families and works with children in school and the family at home. This worker addresses issues such as bullying, domestic violence, low self-esteem, family break-ups and sickness, illness or the pending death of a parent.

The worker has contact with other agencies such as Social Services and health visitors, organisations that provide out of school activities and other charities such as food banks to make sure that families receive all the help available to them

Commissioning of services
The school monitors a range of in-house data such as i-behave - http://www.improvebehaviour.co.uk/, and electronic behaviour support systems, a bullying log, a racist incidence log, and draft in rates for the school nurse and so on.

This data resulted in the commissioning of The Blue Smile project which gives twenty pupils access to weekly counselling. By collecting data on the severity of mental health problems experienced, they have been able to develop the service so more pupils are able to access support.

Building local partnerships
All staff receive annual safeguarding training and are expected to look out for signs of distress and follow the school’s rigorous systems to bring effective and timely support.

Work with statutory agencies has secured further support for families including access to an early year’s mental health nurse; additional support hours from a school nurse; pupil self-referral to the school nurse; and an additional home/school worker who is jointly funded by the locality team. The school has good links with CAMHS and other agencies.

What is the impact and how is it measured?
Academic progress is measured before and after interventions and this has shown that pupils are making better than national progress. The Red Hen Project was independently evaluated and found to achieve excellent outcomes for pupils and families. Blue Smile’s outcomes are measured with a range of robust systems including the Strengths and Difficulties Questionnaire and other assessment models.

How do they fund it?
The school has used a considerable proportion of their Pupil Premium monies to fund interventions that support wellbeing. In addition, Kings Hedges has secured funding from the Lottery and Children in Need, as well as partnering with local voluntary groups that provide services for free or at a subsidised rate.

Contact for further information
bstoneman@kingshedges.cambs.sch.uk
http://www.kingshedgesprimary.org.uk/
SAMUEL RHODES PRIMARY SCHOOL

Samuel Rhodes is a special needs school for students with moderate learning difficulties. There is both a primary and secondary school, but this case study only covers the primary school. The Samuel Rhodes primary school is co-located with Montem School in Islington, North London.

The Borough of Islington has built on their very successful Targeted Mental Health in Schools (TaMHS) project, and currently provides a lot of support to local schools. The local child and adolescent mental health service (CAMHS) work in schools in the borough and provide relevant training; and they also offer to screen year 7 students for potential mental health problems. The Borough’s Healthy School Team is currently looking at setting up their own framework to help schools implement a whole school approach to supporting positive mental health and resilience.

Integrated Working and Service Provision within the School
The school uses a team around the child approach, which means that there is a multidisciplinary team (MDT) which works within the school to help support the child, the family and the school staff. As well as working directly with children and families, the multidisciplinary team also supports the structures which enable them to work collaboratively with the children, school staff and families.

This multidisciplinary team meet and provide sessions with the child and parents within the school in a dedicated therapy room. This multidisciplinary team consists of:

- Speech and Language Therapist (SLT) – who works in the school 2 days a week
- Occupational Therapist (OT) – works in the school 1 day a week
- CAMHS worker - 2 clinicians work half a day each a week, with one focusing more on children, and the other focusing more on families and multi-agency matters.
- School Support Worker, who is based in the secondary school – works 2 days a week.

The Islington Schools Forum funds 1 day a week of CAMHS support, but the school has bought in additional support.

This multidisciplinary team meets regularly within the school to share information and discuss cases. The head of primary is an integral part of this team. This is important because it ensures that this work is led from the top, and that any support and training provided by the multidisciplinary team fits in with current provision and that it is suitable for the school. As well as providing leadership for the work, the head is also a champion for it. This all helps to ensure that it is successfully implemented.

Islington CAMHS offer to provide all schools in the borough with Solihull Approach training http://islingtoncamhs.whitlington.nhs.uk/professionals-2/resources/solihull-approach/. This training has given school staff a framework to help them work with children and parents, and gives them a better understanding of mental health issues and how they can help support their students. It also gives school staff a shared language with the CAMHS workers, which helps support integrated working.

The CAMHS workers have provided school staff with training in 123 Magic - http://www.123magic.com/ which helps them deal with behavioural problems when they arise. The multidisciplinary team have regular meetings with the school staff as well, where specific issues can be discussed.

The multidisciplinary team also provide support for parents, as well as or alongside support for their children. For instance, they have very successfully run Webster-Stratton parenting
programmes - [http://incredibleyears.com/](http://incredibleyears.com/) They had a good turnout for these sessions, and for the other services that the team provide. This is because the parents know the school, and they know and trust the therapists, and so are much more willing to speak to them about their problems.

Having this relationship with parents makes it easier to provide any additional support they might need. For instance, they know about the child’s learning difficulties, and that the parents might not speak English. So it is much easier for the team to provide the additional support that the parent and child might need.

The main aim of the multi-disciplinary team is to provide wrap-around support for families across the various disciplines. This can mean that parents and the child have a join with meeting with CAMHS and other members of the multidisciplinary team. This is a bonus for parents as it reduces the number of different appointments they have to attend.

For more information contact: school@srs.islington.sch.uk

[http://www.samuelrhodes.islington.sch.uk/](http://www.samuelrhodes.islington.sch.uk/)

SMITHY BRIDGE PRIMARY SCHOOL

Smithy Bridge Primary School, in Rochdale, is a foundation school for children aged 3-11.

What do they do?
The Rochdale Healthy Schools Programme has been using the Enhanced Healthy Schools Model for some time. The advanced model builds upon the Healthy Schools Standard and requires schools to evidence real behavioural changes in students.

With this in mind, and as emotional health and wellbeing is a key theme of Healthy Schools, Smithy Bridge Primary School used the Stirling Wellbeing Scale, which was adapted for Rochdale pupils, to measuring wellbeing in Year 6 students. Colleagues from the Healthy Schools Programme helped the school by providing them with the Scale and information about how to use it; but the school itself worked with their pupils to enable them to complete the scale, and then school staff analysed the results. More information about the Stirling Wellbeing Scale can be found above.

The Stirling Wellbeing Scale was used to gather baseline data in September 2012. Research that has used this scale on a large number of children, found that the mean score is 44, with 50% of all scores being within the range of 39 and 48. So, after the students had completed the questions on the scale, they decided to pay particular attention to the 7 children with scores under 40 because they had lower levels of wellbeing.

The school put in place a number of activities and initiatives to promote emotional wellbeing. These included:

- Mood lifting/relaxation activities used in class
- Focus on Emotional Health and Well-being in Y6 PSHCE
- New PSHCE scheme of work for Y1 - Y6
- Children using stress and anxiety scales
- Anger management techniques explored with individuals

To help the school understand whether the new activities and initiatives were actually improving wellbeing they used the Stirling Wellbeing Scale again on the same students nearly a year later in July 2013. As they had already gathered baseline data, they were able to compare the scores and see if wellbeing had improved. They found that 85% of children scored over 45 in 2013 compared to 55% in 2012. The average score was 51 in 2013, compared to 45 in 2012. All of the students who scored under 40 all increased their scores; with some more than doubling it, and the average score for this group was 47 in July 2013 compared to 32 in September 2012. This data suggests that the activities and initiatives put in place were improving the wellbeing across the whole Year group. This was despite some of the students finding the transition to high schools, and SATS particularly challenging.

They also found that by implementing these new activities and initiatives to improve wellbeing improved a number of other outcomes:

- The whole class is beginning to use stress indicators and understand the language of emotion.
- Some of the target children are using the strategies they are learning and are controlling their outbursts more regularly
- Some of the target children are beginning to recognise trigger situations and avoid them
- Learning mentors are reporting that some children are talking positively about their strategies
Contact Sue Astin, Healthy Schools Programme Manager, Rochdale - Sue Astin
sue.astin@rochdale.gov.uk

http://www.sbs.rochdale.sch.uk/
FRAMWELLGATE SCHOOL DURHAM

Framwellgate School Durham is an Academy school for students aged 11-18. The school is committed to developing the potential of its students, and believes in the academic excellence as well as the holistic development of students. Emotional wellbeing is seen as being a key factor in enabling students to achieve their full educational potential and to become responsible individuals well prepared for life beyond school.

The student experience at Framwellgate School Durham is about students:

- Developing themselves (and their skills and aptitudes)
- Working with others and
- Making a contribution to the life of the school and the wider community.

The school believes in facilitating the moral and social development of students as well as promoting their academic progress. This moral and social growth is facilitated by promoting the conditions and environment as well as the planned opportunities for such development. Such opportunities are provided in a wide variety of ways through the curriculum, tutorial provision, assemblies and extra-curricular activities. In terms of the curriculum a significant contribution is made to social and moral development through PSHCE (Personal Social Health & Citizenship education) and Religious Education. In addition, other curriculum areas directly address emotional wellbeing. For example, English lessons tackle the issue of empathy and drama explicitly strives to develop empathy as well as collaborative working and respect for diversity.

Peer mentoring/Anti-bullying Ambassadors
Students can become a peer mentor/anti-bullying ambassador. By doing so, they are engaging in active citizenship, promoting tolerance of diversity, providing guidance to others on relationships and e-safety as well as promoting better emotional health. They can also get involved in community outreach through training peer mentors in our partner primary schools and contributing to Parent/Carer forums on how those at home can help their children deal with issues such as stress and bullying.

Humanutopia Days
The school hosted Humanutopia days for their year 10 students in December 2013 and volunteer Year 10 students led a day for Year 8 students in April 2014 and an afternoon for students in local primary schools. The events were very well received. Humanutopia are a social enterprise group who work with schools and run a range of inspirational workshops and courses for students that focus on personal, social development and employability skills - [http://www.humanutopia.com/](http://www.humanutopia.com/) These workshops can help to build confidence, leadership skills, peer mentoring skills and help students overcome barriers to engaging in their own education.

A social impact analysis following the Humanutopia day, found that the year 10 students rated themselves as having a greater understanding of why they behave in the way they do; were more confident about talking to new people; they cared more about other people’s problems and were more determined to succeed. The school found that the workshops, even though they are a recent intervention, have had a significant impact on students’ social and moral development; and had a positive effect on all students including those with SEN, vulnerable students, the very academic and those who had behavioural problems.
Support for Students who require Additional Support

The Achievement Centre
The Achievement Centre is based within the school and coordinates interventions that also contribute to the student experience. It enables students with Special Needs, who may have emotional wellbeing problems, have experienced trauma at home, or are physically unwell, to access education in a way that works for them. Students can use the Achievement Centre for just a few lessons, or for larger chunks of time. They are very flexible in their approach and can help students, who have for instance been discharged from a psychiatric inpatient unit to have a phased return to education. Students who may have broken a leg for instance, can access the Achievement Centre when they can’t physically access other classrooms. Enabling students to access education in this way, helps promote their emotional wellbeing by ensuring that they can stay in contact with their peers and keep up with their education.

Providing this support to students also requires working with staff, to help them understand why there is a need for this flexibility, and how promoting students’ emotional wellbeing helps them attend school and enables them to reach their full potential.

Counselling Service
The school counselling service was introduced 14 years ago as part of the school’s overall strategy to further improve the wellbeing of children in the school, alongside the drive for academic excellence. The school sees the counselling service as part of the duty of care to their students.

Initially there was some reticence from school staff and governors about introducing the service. For instance, governors were concerned about whether the mental health of students was the responsibility of the school, and wondered if it was more appropriate that Social Services or the NHS should fund this provision. The school was able to demonstrate that the counselling service enhanced the motivation of students, impacted positively on their attendance and learning, and as such improved standards.

The school has 2 counsellors, who work 2 days a week, and provide support for any student who is experiencing personal difficulties. They are valued within the school, and are in high demand. Students can self-refer, or school staff can make a referral for them to the counselling service.

The current school counsellors are employed by the Local Authority and the school buys in their services under a service level agreement with the Local Authority. The school found the process of buying in a trained counsellor very easy, and they are very pleased with the results.

The pastoral care team are currently working on how they can help students who have lower level issues, which may not require the help of a Counsellor. This will help the school provide different levels of support to their students and ensure that those in most need can readily access the counselling service.

They are about to trial sessions where the counsellor and the Student Services Manager meet with groups of parents to discuss issues that affect students’ well-being. The first will focus on exam stress, but thereafter they will see what parents need are.

Working with Child and Adolescent Mental Health Services (CAMHS)
The school has a good working relationship with the local CAMHS. They are able to ring a named contact in CAMHS if they want to discuss concerns about a specific student. CAMHS have made their referral system much easier, so it is now much quicker to refer on a student.
How is the Schools Emotional Wellbeing Work Funded?
The majority of Framwellgate's work to promote the welling of their students is funded through the school's normal funds. Although they have used Pupil Premium monies to help fund their school counselling service, this service has been going for 14 years, and so the investment predates this funding stream. The school obtained monies from the Durham Area Action Partnership - http://www.durham.gov.uk/Pages/Service.aspx?ServicId=6379 which they used to host the Humanutopia days. This grant also supported some vulnerable older students to follow a more appropriate curriculum based on horticulture.

Contact for further information

Kim.oldham@fram.durham.sch.uk

http://www.fram.durham.sch.uk/
HITCHIN GIRLS’ SCHOOL

Hitchin Girls’ School is a specialist science schools and academy trust for girls aged 11-18, in Hitchin, Hertfordshire.

There is a focus in the school on ensuring that everything is joined up and that systems are in place, so that support can be provided quickly if and when it is needed. Students are encouraged to tell someone about your problems at an early stage.

The school has a ‘Statement of Rights’, which extends to both students and staff.

- The students have a right to learn.
- The teacher has a right to teach.
- All within the school community have a right to be safe both physically and psychologically in the classroom.

Re:mindme

The school is in the process of developing an initiative called Re:mindme. It is based on positive psychology and is a whole school approach to promoting emotional wellbeing. They have used positive language and positive messages about early intervention and the fact that students can take control of the situation and overcome their own difficulties. This includes identifying problems when they first arise and if necessary seeking help. There are a number of different routes to support, but when it is needed; systems are quickly put into place.

It acknowledges the importance of mental health and wellbeing for academic attainment and how it is an essential component of being healthy.

Re:mindme was initially set-up by the school's psychology teacher because she saw the need to educate young people (and staff) to be aware of how to keep themselves mentally healthy and avoid crisis points and not be ashamed to ask for help. She drew on her psychology background to get this programme off the ground.

The Re:mindme initiative is not owned by the teachers, but by the school as a whole. They have set-up a working group to take this work forward, which includes a student representative (6th form student), teaching staff, and the Student Development Co-Ordinator and Mental Health Lead. The initiative has the full support of the head and the senior staff. They have been working hard to get buy in from both staff and students and help them think about their own mental health and emotional wellbeing; how staff can be a role model for their students; and also understand the stress that their students may be under. Whilst they had buy in from school staff, it was harder for some staff, especially if they had very limited knowledge of mental health, to think about their own mental health and understand how they could be role models.

The aims of the initiative are the:

- Removal of social stigmas relating to attitudes, perceptions and language about mental health issues.
- Promotion of positive language.
- Promotion of positive mental health role-models and practices by all staff, students and parents/guardians.
- To enable the individual to achieve and maintain good mental health by recognising personal stressors, trigger points and unhelpful coping strategies.
To establish helpful coping mechanisms, increase hardiness and resilience, and be able to put in place appropriate and realistic personal boundaries.

Achieve a realistic work-life balance.

To recognise when expert support and guidance, and/or medical intervention is necessary and not be ashamed to ask for help.

Promoting good mental health and well-being.

One of the first things the working group did was to carry out an audit to establish what they already do to support students’ emotional wellbeing. They were surprised at how much they were already doing.

**Peer Mentors**
The school have set-up a peer mentoring scheme for students, in order to provide support, but also to develop the non-academic aspirations of the young people. The peer mentors are from year 10 and 12 students. They received training from Relate, who are a counselling organisation - [http://www.relate.org.uk/](http://www.relate.org.uk/) The students were trained in how to become peer listeners, were given some safeguarding training and given guidance about how to deal with difficult situations. The aim is for the peer supporters to act as listeners and sign post their fellow students onto relevant help and support.

The school have created a post-box for worries, which is placed in the school’s reception area. Students can post a note in the post-box if they are having a problem, or if they are concerned about a friend. They are asked who they are or who they are concerned about, and what the concern is. The aim is for the peer mentors to help those students who have posted their worry. The Student Development Co-Ordinator and Mental Health Lead is responsible for the post box, and ensures that posts are regularly collected and actioned. The post-box has been launched in assemblies so that students are aware of how to use it. They can also access peer mentoring or other support via the newly launched Moodle area which has links to external support agencies and email addresses to help them seek out help.

**Building Resilience**
The school has introduced resilience training called RISE, which is provided by PHASE a local organisation [http://www.phase-hitchin.org/index.shtml](http://www.phase-hitchin.org/index.shtml) PHASE is a Christian group who work in school to support student needs. This year, RISE ran with a small group of year 11 students; they were looking at personal identity and self-esteem and where they fit in the world. This will be taking place with all year 9 students next year.

The schools learning for Life lessons, (PSHE lessons) include a range of topics, and include lessons on dealing with stress. The students receive 1 hour of these lessons a fortnight. The Learning for Life curriculum is about to be revised and is likely to include more emphasis on emotional wellbeing and resilience.

Mindfulness exercises have been integrated into some lessons. For instance, psychology students were taught mindfulness techniques to help them manage exam stress. They found that these techniques really helped students manage their stress, and be more confident and focused on their exams.

**Prioritising Support – Self-Harm**
They have prioritised informing and supporting students with regards to self-harming behaviours, and there is a lead for the self-harm work. For instance, they have put in place various thing to address this. For instance, holding assemblies which help raise awareness
about self-harm in both student and teachers. As part of their child protection policy, they have been working through how to talk to parents when their child self-harms. They bought in some sessions for young people from Alumina – [http://alumina.selfharm.co.uk/](http://alumina.selfharm.co.uk/) to help give them a better understanding of self-harm. Alumina runs online courses for young people aged 14-19 years.

**Working with Parents**
They have a family support worker who works with parents and carers. They are going to run an evening session for parents and carers on how to support your teenager. Their child protection policy is going to look at how to talk to parents when their child self-harms.

In Hertfordshire, the Developing Special Provision Locally (DSPL) [http://www.hertsdirect.org/services/healthsoc/childfam/specialneeds/educ/dspl/](http://www.hertsdirect.org/services/healthsoc/childfam/specialneeds/educ/dspl/) help deliver support locally. So, they can ask them to put on a course for staff or parents should the need arise.

**Promoting Re:mindme**
Re:mindme will be promoted in the school by a combination of traditional methods - posters, and via the Internet, and social media. Posters will be on walls throughout the school but there will also be a re:mindme noticeboard in every classroom. It will have a presence on the school's Moodle homepage, which is a virtual learning environment that is used by the school and can be accessed by students, staff, parents and governors. There will be information on the plasma screen, which is in the school's reception area. This will include positive statements that will be posted by both students and staff. The student representative of the working party was instrumental in setting-up a twitter self-help page. This will be run by the peer mentors and will include positive quotes and they will have a relevant #tag to bring all of this content together.

For more information contact: judith.billson@hgs.herts.sch.uk

[http://www.hgs.herts.sch.uk/Home/index.htm](http://www.hgs.herts.sch.uk/Home/index.htm)
The Haven Integrated Health Centre – Budehaven Community School

The Haven is an integrated health centre, which is located within and run by Budehaven Community School. This school is located in North Cornwall and serves the town of Bude and the surrounding area. The Haven promotes positive health and lifestyle choices, and provides a range of confidential and non-judgemental services to all children and young people attending Budehaven Community School and Trust primary schools. Providing this integrated health centre sends out a positive message to young people and their families about how the school values their health and wellbeing.

The Haven opened in September 2009 and is based in a converted caretaker’s bungalow on the school grounds, and is managed by the school. It was originally set-up as part of a pilot project, with funding from the Duchy Health Charity to provide integrated health services in schools. Between March 2010 and June 2014 more than 25,000 students and some members of the local community have visited the Haven. About 80% of attendees are students from the school and 20% are from the primary school or pre-school.

Services on Offer

The Haven is open between 8.30am – 3.30pm during term time. It has a very welcoming reception and waiting area, 3 consulting rooms including a bespoke clinical room and a large conference room. The conference room is used for child protection meetings, training, interviews and sometimes as a quiet place for students to eat their lunch. There is also a garden, which is used as a quiet and safe place for students to go to during break times and lunchtimes.

Young people and parents can access a wide range of services which include the school nursing services, careers advice, sexual health service including Brook Advisory Service, Cornwall Share, bereavement support, diabetic clinics, CAMHS, drug and alcohol services, parenting groups, and support for abusive relationships. Providing such a range of services under one roof means that children and young people can attend the Haven for a number of different reasons, which may include mental health support. This helps to take the stigma out of accessing help and support for emotional health and wellbeing issues.

There is a facilitator who triages the young people wanting support from the Haven. She manages the appointments and acts as a first point of contact for service users, giving advice and guidance and making referrals where appropriate in agreement with the student and assistant head teacher. She is managed by an Assistant Head, so there are strong links between The Haven and the senior management team within the school.

Easily Accessible Services

The school is in a very rural area, so providing such a comprehensive range of services on site means that students spend less time out of lessons attending appointments. This is essential as the area has poor public transport links, and so attending appointments in nearby towns can be very difficult and time consuming, even if the family has a car.

The services are very accessible and flexible, with lunchtime drop-ins, as well as scheduled appointments. This all makes the service very young people focused, which in turn encourages students to use the Haven, and see it as the place to go if they have health or emotional wellbeing concerns.
Involving Young People

The original pilot project required the Haven to be young person friendly, so there has been a strong element of young person involvement from the very beginning. There is a Student Management Group, which contains young people of all ages including 6th formers. Involving young people in this way helps to give them ownership of the Centre.

The Student Management Group was involved in the setting-up and the ongoing running of the Haven. They were heavily involved in designing the Haven and were instrumental in obtaining funds from ‘Our Money, Your Dreams’ to furnish the building. Their involvement in the planning and in choosing the furnishings has made it a very inviting and young person friendly environment, which encourages them to access the services on offer. The Student Management Group has also worked with a local garden designer to create a lovely garden which provides a peaceful space for both students and parents.

The Haven has been awarded EEFO Level 3 accreditation, which means that it has been awarded their highest level for young person friendly services. EEFO is run by Cornwall Council’s Health Promotion Department and they evaluate young people’s services in the county – [www.eefo.net](http://www.eefo.net)

The Haven recently ran a student survey, in collaboration with EEFO, to see if students felt services could be improved at The Haven and some useful feedback was received and acted upon.

Multiagency Working

The previous facilitator was a mental health nurse and his knowledge and experience of working in the NHS helped the school to negotiate with the NHS to enable NHS employees to work out of the Haven.

The school do not charge services for using space at The Haven. Whilst there have been pressures to do so, they have found that the good will shown by the school has helped to build relationships with local agencies and has encouraged these agencies to help them. For instance, there is a strong PSHE team within the school, and they have been able to get support from the multiagency team when required.

Adjacent to The Haven and still on school grounds, is the Keven, which is a building, owned by Cornwall County Council, but managed by the school. It provides hot-desking facilities for local authority, and NHS staff working to support children and families such as social workers. Voluntary organisations are also able to use the meeting rooms for family support work. The two centres are linked, but young people tend to go to The Haven, and adults go to The Keven.

Sharing the space enables professionals to meet who might not otherwise and this in itself aids professional working relationships. The Haven holds social events to thank the various agencies, and provides an opportunity for them to meet each other.

For more information contact [thehaven@budehaven.cornwall.sch.uk](mailto:thehaven@budehaven.cornwall.sch.uk)

[http://www.budehaven.cornwall.sch.uk/the-haven-ihc/](http://www.budehaven.cornwall.sch.uk/the-haven-ihc/)

A research paper based on the evaluation of the integrated health centres in schools pilot projects can be downloaded from
THE HARBOUR SCHOOL

The Harbour School (THS) is a special school, in Portsmouth, for pupils aged 5-16 with behavioural, emotional and social difficulties (BESD) and medical needs. It is a five site school offering BESD statement places and alternative provision places across the City of Portsmouth, including outreach and a residential hostel.

What is the need?
THS is larger and more complex than most special schools. Nearly all pupils have special educational needs connected to their behavioural, emotional and social difficulties.

What do they do?

- **Whole School Approach**
  The vision and values of the school are embedded in a culture of inclusion and the every child matters agenda. Emotional wellbeing is kept at the forefront of all learning across THS through regular reflect and review, briefings and de-brief, lesson observations and monitoring of teaching and learning. These practices inform the school’s development planning, including continued personal development and developing multi-agency work.

  The school has established a whole school approach through strategic and systemic planning in their School Development Plan (SDP). There are five key strands in the SDP which are systemically and robustly reviewed:
  - Attendance
  - Social and emotional progress
  - Behaviour, exclusions and reintegration
  - Curriculum achievement and attainment
  - Outreach services based at ‘The Harbour School@Milton’ site

  All five of these areas interconnect and they have found that the most positive outcomes occur when there is a holistic, multi-agency approach with parents/carers in supporting learners across these key areas.

  The school’s Self Evaluation Summary identifies key strengths and areas for development and so informs the next steps in whole school development. Staff are encouraged to contribute to this and a culture of reflect and review is embedded across the school.

- **SEAL**
  From its opening, the Social and Emotional Aspects of Learning (SEAL) has been at the heart of all learning across the school. All lessons have a subject learning objective and a SEAL objective. SEAL is also taught as explicit lessons.

  Teaches and deliverers use the schools’ progress materials, SEAL APP (assessing pupil and progress) to help them identify what the students are able to do across the 5 strands of SEAL and what needs to be learnt - [http://tinyurl.com/nbnfyh2](http://tinyurl.com/nbnfyh2)

- **Individual learning**
An individual learning plan (ILP) is drawn up with every young person, key staff and parents/carers. The ILP identifies reasons for referral and understanding of presenting behaviours. Targets and actions for progression are identified, shared and agreed for curriculum learning, behaviour, social and emotional development and attendance. These targets are regularly reviewed.

- **Multiagency working**
The school works with a range of external agencies such as CAMHS, youth offending teams, SEN Teams, Exclusion Teams and various local voluntary sector organisations to aid communication and understanding. By doing this it helps them support learners in their behaviour, social and emotional development.

Senior leaders from the school and CAMHS work at a strategic level in planning and supporting vulnerable learners. CAMHS offer supervision and support good practice. CAMHS have also developed the Good to Talk programme with volunteer counsellors.

The Educational Psychology service provides support with observations, teaching strategies, training and statutory requests. Pastoral managers from each of the 5 sites engage other agencies for direct work with a range of students from disaffected students to others who are putting themselves at risk.

- **Supporting Staff**
Staff wellbeing is held in the highest regard. Senior leaders on all sites have a common approach to supporting the wellbeing of effective teams. All staff have access to supervision, from daily de-brief to one-to-one sessions with line managers or partners in CAMHS.

- **Bereavement/Loss**
Each site has a loss champion who is able to work with individual learners. They work with those who have experienced bereavement through to those with deteriorating medical needs.

- **Complex cases**
The most complex cases are discussed and planned in ways that better meet the individual's emotional needs. The most complex cases are referred to the school's Pupil Placement Panel, which is formed of senior leaders who suggest ways forward.

The Multi-Systemic Team (MST) is working with the school to help some of the hardest to reach and complex families. Further information about MST can be found by following these links: [http://mstuk.org/mst-uk/mst-uk-teams](http://mstuk.org/mst-uk/mst-uk-teams) and [http://www.portsmouth.gov.uk/media/MST_information_for_parents.pdf](http://www.portsmouth.gov.uk/media/MST_information_for_parents.pdf)

THS@Stamshaw site provides a highly specialised, therapeutic approach for a maximum of ten learners who are most at risk. Personalised programmes based on social and emotional needs; ensure that learners are able to access the learning they
most need.

- **What is the impact and how is it measured?**
  On arrival all learners, parents/carers and teachers/key staff complete a National Foundation for Educational Research (NFER) emotional literacy checklist. This gives a baseline score across the five strands of SEAL and indicates areas for learning in SEAL. The behaviour score is reviewed every six weeks and the NFER checklist repeated every six months. These score are entered onto a database and analysed for progress, trends and those most at risk. This data supports the development of teaching and learning in behaviour and social and emotional skills.

  All sites use daily diaries to support learning in behaviour and social and emotional development. Staff discuss these diaries with learners, identifying successes and challenges.

  Attendance has increased by 4.9%, and 69% of learners have increased attendance; 69% of learners have made progress with the development of their social and emotional skills; and 85% of learners have improved their behaviour score; and there was a 7% increase in the number of learners receiving the schools gold standard (5A*-G).

**Contact for further information**

[lisa.taylor@thsportsmouth.org](mailto:lisa.taylor@thsportsmouth.org)

[http://theharbourschoolportsmouth.org/](http://theharbourschoolportsmouth.org/)
**PENN RESILIENCE PROGRAMME**

The Penn Resilience Programme (PRP) (also referred to as the UK Resilience Programme) is an 18-lesson curriculum that is aimed at 11-13 year olds (although it has been used with a range of different age groups). The programme enables young people to develop skills that empower them to be more resilient in dealing with situations both in and out of school. Young people develop skills in emotion control and emotional awareness, problem solving, assertiveness, peer relationships, and decision making.

How to Thrive - [http://www.howtothrive.org/](http://www.howtothrive.org/) provides leading-edge expertise in the skills that allow children and young people to thrive and flourish. They are the only UK based organisation providing the PRP training.

**Curriculum Models Used to Teach the Penn Resilience Programme**

There are many different delivery models and options to teach the PRP, but they have two key features:

1. Young people are taught the whole 18 lessons in order.
2. The lessons are taught by trained PRP Teachers.

It is suggested that the best results are achieved when the programme is taught to universal groups of approximately 15 students, although good outcomes have also been achieved with larger group sizes of 30. Below are some examples of the current delivery models being adopted in schools across the UK (there are also examples of the PRP being taught in non-school settings):

- PRP is taught once a week in PSHE time, with half the year group doing PSHE for 18 weeks and half the year group doing PRP for 18 weeks.
- PRP is taught once a fortnight over 38 weeks. The whole year group is split into 4 teaching groups.
- PRP is taught at the end of year 7 and into the beginning of year 8, with extra time to allow for review given the 6 week break.

More information about the Curriculum models can be found by following this link - [http://www.howtothrive.org/thrivingschools/penn-resilience-program/curriculum-models](http://www.howtothrive.org/thrivingschools/penn-resilience-program/curriculum-models)

The How to Thrive website includes some case studies which focus on how schools are using the Penn Resilience Programme - [http://www.howtothrive.org/thrivingschools/penn-resilience-program/case-studies](http://www.howtothrive.org/thrivingschools/penn-resilience-program/case-studies)

**Findings from an Independent Evaluation of PRP**

A three year study, led by the London School of Economics, of the implementation of the PRP that was delivered to all year 7 students in 22 schools in Hertfordshire, Manchester and
South Tyneside, found that

- Pupils were generally positive about the programme and had applied the skills learnt in real life situations.
- Short-term improvements in depression symptom scores, school attendance rates and academic attainment in English.
- Weekly workshops had more impact that fortnightly ones.
- The workshops had more impact on the most vulnerable groups such as those entitled to free school meals; who had not attained the national targets in English or maths at Key Stage 2; or who had worse scores for depression or anxiety; in terms of their depression and anxiety scores.
- The effect of the workshops only lasted as long as the academic year and had faded by one-year follow up. However, there was still an impact for certain groups, particularly for pupils who had not attained the national target levels in English or maths at Key Stage 2.

Further information and a short video about the PRP programme can be found by following the links below. This link also includes a video of how Longdean School in Hertfordshire has implemented the PRP programme. There are also written case studies from Kings Langley School, and Pinewood school, which also focus on how they have implemented the PRP programme - [http://www.howtothrive.org/thrivingschools/penn-resilience-program](http://www.howtothrive.org/thrivingschools/penn-resilience-program) or [http://www.c4eo.org.uk/themes/general/vlpdetails.aspx?fpeid=176](http://www.c4eo.org.uk/themes/general/vlpdetails.aspx?fpeid=176)

**Developing Healthy Minds Curriculum**

Building on the PRP research, How to Thrive, are currently leading a longer intervention to acknowledge the need to deliver a more sustained approach to building emotional resilience and wellbeing with students. The national ‘Healthy Minds’ research project involves 34 UK secondary schools teaching a specific curriculum that has the PRP as the foundational element. The curriculum covers the national Personal, Social, Health, Education (PSHE) requirement and will deliver a high quality curriculum to students; and it will provide one lesson per week from year 7 to year 10. For more information go to: [http://www.howtothrive.org/component/content/article/1-news/50-healthy-minds-](http://www.howtothrive.org/component/content/article/1-news/50-healthy-minds-)

For more information about How to Thrive, go to – [http://www.howtothrive.org](http://www.howtothrive.org)
PLACE2BE

Place2be is a national charity that works inside over 200 schools across the UK; supporting over 75,000 children aged 4-14. The charity provides both universal and targeted support to children, their parents and teachers. They offer a flexible menu of services, tailored to meet each school's needs. The typical model is based on a team of five or more Place2Be personnel (both clinical staff and highly skilled volunteers) delivering a range of services in a school.

Place2Be’s school-based services for children and Young People

- One-to-one counselling sessions to provide support to children who have a sustained need for more intense work.
- Group work is available on particular issues such as friendship, bereavement, transitions, bullying and so on.
- Place2Talk is a lunchtime self-referral, drop-in service, that is open to all pupils in a place2be school (both individuals and in groups). It provides a quiet place to talk to a counsellor during the busy school day.

Place2Be’s services for School Staff

- Place2Think provides teachers and school staff with a consultation service to develop practical approaches that enable them to support students more effectively.
- Training - They provide continuous professional development training sessions that address themes related to children’s emotional wellbeing in schools, such as safeguarding, attachment, understanding risks and resilience etc. The sessions help reduce teacher and staff stress by providing practical approaches that help them provide effective support. They also provide a range of professional qualifications around counselling in schools.
- They also provide advice and support on safeguarding to help protect children.

Place2Be Services for Parents

- Place2Be works one-to-one with parents and carers in schools and runs group-based parenting groups in schools and children’s centres. Also, they train school and community professionals in their engagement with vulnerable families that they often experience as challenging.

Liaison and Collaboration with other Local Services

- Place2Be acts as the glue between the school and local services. They can liaise and collaborate with other educational and children’s welfare organisations. For instance, they have good relationships with CAMHS and other local services, and this can help with referral if and when they are required.
Impact of Place2Be

In the 2012/13 academic year:

- 84% of children who had severe emotional difficulties showed a significant improvement, according to their parents
- 70% of children with significant difficulties were less of a burden on the teacher or class, according to their teacher.
- 65% of children whose difficulties interfered with their learning improved according to their teacher.

Funding

Schools typically pay 70-80% of the total annual cost as the work is also supported through private and statutory funding. Many of the schools who commission Place2Be services use funds from the Pupil Premium. This is because Place2Be often works in areas of high deprivation and are able to evidence the impact of improved psychological wellbeing on pupil’s academic progress.

For more information contact: enquiries@place2be.org.uk

http://www.place2be.org.uk

Place2Be have a video on their website, which outlines their work –

http://www.place2be.org.uk/what-we-do/
**PSHE Association:** How PSHE Can Promote Emotional Wellbeing

**Pupils can be educated about how to look after their emotional health**

PSHE lessons can be used to actively promote emotional wellbeing and positive mental health. This can be done directly using schemes of work designed to provide pupils with the skills and knowledge they need to increase their emotional resilience. A DfE-funded 2007-2010 study of emotional resilience programmes in 22 UK schools, known as the UK Resilience Programme, mostly delivered through PSHE lessons, found improvements in anxiety and depression levels, and increased attainment and attendance.

**Education can lead to decreased stigma and bullying**

Informing and educating pupils about common mental health and emotional wellbeing issues such as self-harm, eating disorders and depression, can reduce the stigma associated to these conditions. Reducing the stigma associated to mental health and emotional wellbeing can better enable young people to seek the support they need to overcome such issues. Also, reducing stigma can in turn reduce related bullying. Bullying is a factor which commonly contributes to the development and maintenance of poor mental health and emotional wellbeing and is often covered in PSHE lessons. A 2011 DfE survey of over 1,000 schools’ anti-bullying strategies found that, without exception, PSHE lessons were reported to have had a positive impact.

**PSHE lessons can inform pupils about what is and isn’t acceptable**

PSHE lessons provide an opportunity to educate pupils about issues related to consent and healthy relationships. This can help them to develop healthier relationships, and where necessary, to exit from relationships which may be damaging to their emotional wellbeing. For example, pupils can be taught very clearly about the different types of domestic abuse including psychological, emotional and physical abuse and that there is never a situation in which it is appropriate to be abused in this way whether it is by a family member or partner. Additionally, pupils can be taught about full, informed consent, giving them the skills and knowledge they need to participate in healthy, consensual relationships. The PSHE Association recently teamed with Brook and the Sex Education Forum to develop comprehensive guidelines for schools about how to teach sex and relationships education in the 21st Century.

**Pupils can gain the skills and language they need to overcome difficulties**

In addition to teaching pupils about issues such as abuse and consent, PSHE lessons can also be used to develop the skills and language pupils need to ask for help if they are in need of support due to concerns of a child protection, mental health or emotional wellbeing nature.

**PSHE lessons can usefully signpost sources of support**

Whilst PSHE teachers are not counsellors, and a PSHE lesson is never the appropriate time for pupils to make disclosures of a personal nature, PSHE lessons can very usefully signpost sources of support for pupils. They can also make it very clear to pupils what is likely to happen if they choose to make a disclosure, reassuring them that they will be listened to.

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3 Anti-Bullying Alliance (2014) Bullying and Mental Health in Children and Young People
non-judgmentally, taken seriously and offered appropriate support. This will increase the likelihood of pupils choosing to make a disclosure and therefore getting the support they need.

Case studies that focus on how school are implementing PSHE can be found on the PSHE Association website - http://www.pshe-association.org.uk/content.aspx?CategoryID=1114

More information can be found on the The PSHE Association website - http://www.pshe-association.org.uk/ but they recommend the following resources to help schools develop and implement an effective PSHE curriculum.

- **PSHE Education Programme of Study (Key stages 1-4)** - http://www.pshe-association.org.uk/resources_search_details.aspx?ResourceId=495&Keyword=&SubjectID=0&LevelID=0&ResourceTypeID=3&SuggestedUserID=0
- **Creating a PSHE education policy for your school** - http://www.pshe-association.org.uk/resources_search_details.aspx?ResourceId=520&Keyword=&SubjectID=0&LevelID=0&ResourceTypeID=3&SuggestedUserID=0
- **Guidance on eating disorders** - http://www.pshe-association.org.uk/resources_search_details.aspx?ResourceId=523&Keyword=&SubjectID=0&LevelID=0&ResourceTypeID=3&SuggestedUserID=0
- **Talking to pupils when they make mental health disclosures** - http://www.pshe-association.org.uk/resources_search_details.aspx?ResourceId=506&Keyword=&SubjectID=0&LevelID=0&ResourceTypeID=3&SuggestedUserID=0
- **Sex and relationship education for the 21st Century** - http://www.pshe-association.org.uk/resources_search_details.aspx?ResourceId=526&Keyword=&SubjectID=0&LevelID=0&ResourceTypeID=3&SuggestedUserID=0
The Thrive Approach – Developing Emotional Resilience

We know more now than ever before about what helps to develop healthy curious minds and happy, confident and creative children.

The Thrive Approach draws on the latest research - from current neuroscience, recent attachment research, current studies of effective learning and current models of child development – in order to help adults understand children’s behaviour as communication. It is an integrated approach; its strength is that it pulls together work from different disciplines to provide one model that is systematic, dynamic and relevant and helps adults respond to a child's emotional situation in a way that supports their emotional and social development.

If children have been emotionally thrown off track, either temporarily or over longer periods, Thrive helps us understand the needs being signalled by their behaviour and gives us targeted strategies and activities to help them re-engage.

Cause and effect

Feelings are closely linked to behaviour and emotions are key to the learning process. We can teach children to recognise and notice their sensations and then link these to their emotions and their thoughts. We build their cognitive, relational and physiological regulation systems so that they can see cause and effect and begin to make real choices, with some understanding of their consequences. This is the beginning of being responsible for one's actions. It has enormous impact on behaviour, on relationships, on being available to learn and on being productive and engaged in human society.

The relationship between a child and a significant adult is an under-recognised and under-used resource, but by using The Thrive Approach we can enhance this relationship, which will bear fruit. It can:

- help a child get ready to learn
- enhance their learning
- build positive relationships between a child and his/her peers
- improve attainment

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Why have we created Thrive?

The four originators of The Thrive Approach came together in 1994 concerned about the number of children being excluded from schools and learning at an earlier and earlier age.

They drew on their collective expertise in social work, family therapy, counselling and psychotherapy, and education advisory and inspection work in schools to create an approach that drew on the up-to-date research and best practice.

They operated first under the banner, 'Fronting The Challenge', because that is what it felt like, responding proactively to the debate in society at large about disruptive and anti-social behaviours, disaffection, discipline and the development of moral and social responsibility.

As it stands today this program and approach is the result of diverse contributions from committed practitioners in all relevant fields (education, social care, health, family work, psychotherapy) as the originators have honed the tools and training to maximise its effectiveness.

The Thrive team believes that:

- Emotional health and wellbeing can be promoted in all settings for all children.
- The adult - child relationship is key.
- Emotional health and wellbeing are connected directly to a child's emotional development, which in turn affects their behaviour and their access to (and progress in) learning and relating.
- Child care workers in Early Years settings can plan and put in place the best possible provision for little ones as they grow at the 'right time' so that more reparative work is not so necessary later on in the child's life.
- Teachers and other adults who work with children need strategies to prevent behavioural problems and to meet the developmental needs of young people as learners.
- The teacher/learner relationship and the curriculum can be used to prevent and to respond to disruptive behaviour. This is both practical and possible in ordinary classrooms in mainstream schools.
- Short-term expediencies that deal with behavioural problems in an isolated way do not solve the difficulties in the long term, either for the young person, the family, the school or the community.

General Enquiries

- Tel: 01392 797 555
- Email: enquiries@thriveapproach.com
  - www.thriveapproach.co.uk