



Mental Health and Wellbeing Policy

BCTG Mental Health and Wellbeing Overview

Policy Statement “Mental health is a state of wellbeing in which every individual realises their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.” (World Health Organisation)

BCTG believes by promoting positive mental health to all staff, learners, and other stakeholders and using a whole approach and promoting a positive culture which aims to promote a safe and stable environment for learners affected both directly and indirectly by mental ill health and having effective support of mental health and wellbeing can have a direct impact on the Quality of Education, and on the learning experience.

Good mental health is defined as: feeling relatively confident in yourself and having positive self-esteem; feeling and expressing a range of emotions; building and maintaining good relationships with others; feeling engaged with the world around you; living and working productively; coping with the stresses of daily life; and adapting and managing in times of change and uncertainty (adapted from Mind UK).

Our Commitment

All employees who collaborate with learners have a crucial role to play in shaping their lives. We have a unique opportunity to interact in ways that are both positive and inspiring. Mental health and wellbeing form a crucial part of the Safeguarding agenda is wide-ranging term that should include having suitable policies, procedures, and risk assessments in place to protect learners and staff.

BCTG staff and subcontractors need to understand how to maintain safe and responsive environments which safeguard all and is supportive of mental health and wellbeing. It is the role of all BCTG staff and subcontractors to safeguard and promote welfare, and to enhance awareness of the broader welfare spectrum, issues in society that can affect their wellbeing.

Sub-Contractors need to demonstrate that safeguarding arrangements are in place to prevent and protect children, young people, and adults at risk, reflecting the practices of BCTG, and how they promote good mental health and wellbeing.

Objectives

The aim of this policy is to ensure that everyone employed by BCTG, and subcontractors, understands and are aware of the responsibilities of themselves and of others. All employees and sub-contractors should be able to recognise any signs if there is a concern and be able to follow reporting procedures.

The policy aims to:

- support and develop wellbeing and emotional resilience in staff and learners.
- promote positive mental health in all learners.
- increase understanding and awareness of common mental health issues.

- alert staff to early warning signs of mental ill health.
- provide support to staff working with young people and adults at risk with mental health issues.
- provide support, adjustment and signposting to learners experiencing mental ill health.

Designated Safeguarding Lead Responsibility

- To ensure policies are implemented, followed, reviewed, and updated accordingly.
- To offer support and guidance to other staff and DSL/DDSL.
- Coordinate reporting procedures.
- Support the contextualised curriculum for mental health and wellbeing.
- Work and support sub-contractors to implement a process for monitoring mental health and wellbeing concerns.

Staff Responsibility

- Staff have a responsibility to promote the emotional resilience, wellbeing, and positive mental health of learners.

Each educator has a professional duty to:

- ensure a safe working environment is provided to learners where they feel heard.
- create positive relationships with learners premised on mutual trust and understanding.
- be aware of the indicators and symptoms of poor mental health and wellbeing.
- ensure vigilance in recognising changes in behaviour or mood.
- support the Designated Safeguarding Lead
- follow policies and reporting procedures.
- To develop the learners' skills, knowledge and understanding needed to keep themselves and others physically and mentally healthy and safe are included as part of the learning programme.

Early Warning Signs

Staff should be aware of warning signs which may indicate a learner is experiencing mental health or wellbeing issues. These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with the DSL/DDSL.

Possible warning signs include:

- physical signs of harm that are repeated or appear non-accidental.
- changes in eating or sleeping habits.
- increased isolation from friends or family, becoming socially withdrawn.
- changes in activity and mood.
- talking or joking about self-harm or suicide.
- abusing drugs or alcohol.
- expressing feelings of failure.
- uselessness or loss of hope.
- changes in clothing, e.g., long sleeves in warm weather.
- secretive behaviour; and lateness to or absence

It is important to note that any change in the usual behaviour or presentation of a learner may indicate poor mental health and this should be considered as a possible explanation.

Common Mental Health

Depression - The main symptoms are feeling 'low' and losing pleasure in things that were once enjoyable. These symptoms may be combined with others, such as feeling tearful, irritable, or tired most of the time, changes in appetite, and problems with sleep, concentration, and memory. People with depression typically have lots of negative thoughts and feelings of guilt and worthlessness; they often criticise themselves and lack confidence.

Generalised Anxiety Disorder - The main symptoms are having a number of different worries that are excessive and out of proportion to a particular situation and having difficulty in controlling one's worries. A person with generalised anxiety disorder may also feel irritable and have physical symptoms such as restlessness, feeling easily tired, and having tense muscles. They may also have trouble concentrating or sleeping.

Panic Disorder - The main symptoms are having unexpected and recurring panic attacks, and also worrying about having another panic attack. One of the symptoms of a panic attack is an increased heart rate. A panic attack may happen because of a particular situation (something that the person fears or wants to avoid), or it may have no obvious cause. People who have panic attacks often change their behaviour because of the attack, which may develop into phobias such as agoraphobia (a fear of being in places or situations that are difficult to escape from).

Obsessive-Compulsive Disorder - The main symptoms are having thoughts, images or impulses that keep coming into the mind and are difficult to get rid of (called obsessions), and a strong feeling that the person must carry out or repeat certain physical acts or mental processes (called compulsions). Common obsessions include being afraid of dirt and germs, worrying that something is not safe (such as an electrical appliance), wanting to have things in a particular order, and thoughts and fears of harming someone else. Common compulsions include excessive washing and cleaning, checking things repeatedly, keeping objects that other people might throw away, and repeating acts, words or numbers in a pattern.

Post-Traumatic Stress Disorder - Psychological and physical symptoms that can sometimes follow threatening or distressing events. One of the most common symptoms of PTSD is having repeated and intrusive distressing memories of the event. There may also be a feeling of reliving the event through flashbacks or nightmares. There can also be physical reactions, such as shaking and sweating.

Other common mental health problems can include phobias, eating disorders, Bi-polar disorder, schizophrenia, loneliness.

The terms mild, moderate, and severe are used in this information to describe different levels of mental health problems.

A **mild** mental health problem is when a person has a small number of symptoms that have a limited effect on their daily life.

A **moderate** mental health problem is when a person has more symptoms that can make their daily life much more difficult than usual.

A **severe** mental health problem is when a person has many symptoms that can make their daily life extremely difficult.

A person may experience different levels at different times, mental health problems may also overlap or coexist with other mental health problems.

Managing Disclosures

A learner may choose to disclose concerns about themselves or a friend to any member of staff and so all staff need to know how to respond appropriately to a disclosure. If a learner chooses to disclose concerns about their own mental health or that of a friend, the member of staff's response should always be calm, supportive, and non-judgemental.

All disclosures should be recorded using the Safeguarding Report Form. Staff should listen rather than advise, with full consideration of the learner's emotional and physical safety. Staff must be honest about the issue of confidentiality. Staff should never share information about a learner without first telling them. Ideally staff should receive their consent, though there are certain situations when information must always be shared with another member of staff, an external agency and/or a parent/carer in line with our safeguarding policy and where there is a risk of harm to the learner themselves or others.

Report to the DSL/DDSL.

Training

Training All staff will receive regular training about recognising and responding to mental health issues in addition to their regular safeguarding training. Staff who require more in-depth knowledge will have access to relevant training and additional training for staff will also be supported throughout the year.

At a minimum:

- Mental Health Awareness Training
- Managing Mental Health for managers
- Mental Health First Aid Training (DSL/DDSL)

Staff who wish to undertake any form of training relevant to their role should raise the matter informally with their line managers in the first instance through their induction, probation, appraisal, or PDP review. Staff have the responsibility to identify appropriate CPD and personal development.

Sub-Contractor CPD expectations

DSL/DDSL will submit certification evidence of Mental Health Training. Submit sub-contractor staff training and CPD records for mental health training to the BCTG Quality team.

Subcontractor quality/delivery staff will submit evidence of mental health and wellbeing in curriculum and processes used in developing learner awareness. Submitted to the quality team for scrutiny, reported to contract managers and SLT.

Reporting

- Any member of staff who is concerned about the mental health or wellbeing of a learner should speak to a member of the safeguarding team.
- Any member of staff who is concerned about the mental health or wellbeing of a staff member should speak to a member of the safeguarding team.
- If there is concern that the learner is in danger of immediate harm, then safeguarding and child protection procedures should be followed.
- If the learner presents a medical emergency, then the procedures for medical emergencies should be followed, including alerting the first aid staff and contacting the emergency services if necessary.
- Where an external referral is required, this will be led and managed by the Designated Safeguarding Lead/DDSL
- The safeguarding reporting forms should be used in reporting concerns or issues.

The policy will be monitored and reviewed annually by BCTG Governance Board