



# Social, Emotional and Mental Health Policy

Written by	Adopted by Governing Body	Review Date
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## 1. Introduction

### Statement of intent

At Baysgarth School we are passionate about making a difference to the lives of young people. We believe in teamwork; working with each other, with teachers and colleagues across the school, with the wider school community and most importantly with the young people in our school.

We act with determination; whatever issues our students, their families, the school, our team or the community face, we always support, react and pull together.

Everyone experiences life challenges that can make us vulnerable. At times, any one of us may need additional support to maintain or develop good mental health. The mental health of children and young people, adults in schools, parents and carers and the wider whole school community will impact on all areas of development, learning, achievement and experience. All children and young people have the right to be educated in an environment that supports and promotes positive mental health for everybody. All adults have the right to work in an environment that supports and promotes positive mental health for everybody. At **Baysgarth School** we are committed to raising awareness, increasing understanding and providing a place where all children and young people feel safe, secure and able to achieve and experience success and well-being.

Finally, we are committed to making a difference; we are not passive players in young people's lives but active participants who can and do make a real difference. These are a reflection of the school's missions, values and vision, in particular to play a key role in building, developing and celebrating a strong, tolerant community in and out of school that improves the life chances of our young people.

Our moral purpose can therefore be summarised below -

- Teamwork.
- Determination.
- Commitment.

### Mental Health Definition

"Mental health is a state of well-being in which an individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community."

*World Health Organisation, 2018*

What supporting Positive Mental Health means to us:

At Baysgarth School, we aim to promote positive mental health for every member of our staff and student body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable students.

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. Among secondary school aged children (11 to 16 year olds), 17.6% were identified with a probable mental disorder in 2020, an increase from 12.6% in 2017 (*NHS Digital, Mental Health of Children and Young People in England, 2020*).

By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for students affected both directly, and indirectly by mental ill health.

**Therefore:**

- We prioritise those who need our help most, but we promote positive mental health with everyone.
- We embed social, emotional and mental health awareness across the curriculum.
- Children and young people are taught skills to build resilience and manage everyday stressors.
- Staff wellbeing, resilience and mental health is a key focus.
- We have a highly trained Pastoral Team who deliver interventions based on evidence-based practice.

**How we ensure best practice:**

- The child stays at the centre of every conversation.
- Safeguarding records and student records are kept up to date.
- Staff read and understand Part One of Keeping Children Safe in Education 2022.
- Staff know our behaviour, attendance and safeguarding policies and protocols.
- The wider school community has an active voice about SEMH.
- We monitor SEMH interventions and adjust where necessary
- All staff have training and the option of supervision to effectively support student SEMH
- Speaking to each other with courtesy, respect and empathy is essential and is part of the school's mission, vision and values (**RESPECT** - Be respectful to all members of the school community through our actions and our use of language).

## **2. Aims and Legal Framework**

This Policy Aims to:

- Promote positive mental health in all staff and students
- Increase understanding and awareness of common mental health issues
- Alert staff and students to early warning signs of mental ill health
- Provide support to staff working with young people with mental health issues
- Provide support to students suffering mental ill health and their peers and parents/carers.

2.1 This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Children and Families Act 2014
- Health and Social Care Act 2012
- Equality Act 2010
- Education Act 2011
- Mental Capacity Act 2005
- Children Act 1989

2.2 This policy has been created with regard to the following DfE guidance:

- DfE (2022) 'Keeping children safe in education'
- DfE (2018) 'Mental health and behaviour in schools'
- DfE (2020) 'Special educational needs and disabilities code of practice: 0 to 25'

2.3 This policy also has due regard to the school's policies including, but not limited to, the following:

- Child Protection and Safeguarding Policy

- SEND Policy
- Behaviour Policy
- Supporting students with Medical Conditions Policy
- Staff Code of Conduct
- Exclusion Policy

### 3. Understanding Mental Health Difficulties

Where children and young people experience a range of emotional and behavioural problems that are outside the normal range for their age, they might be described as experiencing mental health problems or disorders.

Mental health professionals have classified these as:

- Emotional disorders, for example phobias, anxiety states and depression;
- Conduct disorders, for example stealing, defiance, fire-setting, aggression and anti-social behaviour;
- Hyperkinetic disorders, for example disturbance of activity and attention;
- Developmental disorders, for example delay in acquiring certain skills such as speech, social ability or bladder control, primarily affecting children with autism and those with pervasive developmental disorders;
- Attachment disorders, for example children who are markedly distressed or socially impaired as a result of an extremely abnormal pattern of attachment to parents or major care givers;
- Trauma disorders, such as post-traumatic stress disorder, as a result of traumatic experiences or persistent periods of abuse and neglect; and
- Other mental health problems; eating disorders, habit disorders, somatic disorders; and psychotic disorders such as schizophrenia and manic depressive disorder.

Only **appropriately trained professionals should attempt to make a diagnosis of a mental health problem**. Non-professional diagnoses, however well meant, can exacerbate or promote mental health problems.

Schools, however, are well placed to observe children and young people day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one. This may include withdrawn students whose needs may otherwise go unrecognised. Students with SEMH experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviours. These sometimes reflect underlying mental health difficulties such as anxiety and depression, self-injury, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other students may have disorders such as attention deficit disorder (ADD), attention deficit hyperactivity disorder (ADHD) or attachment disorder.

Staff members are aware of the signs that may indicate if a student is struggling with their SEMH. The signs of SEMH difficulties may include, but are not limited to, the following list:

- Anxiety, low mood, being withdrawn
- Avoiding risks, unable to make choices, low self-worth
- Isolating themselves
- Refusing to accept praise, failure to engage
- Poor personal presentation, lethargy/apathy, eating issues
- Daydreaming
- Unable to make and maintain friendships, speech anxiety/reluctance to speak, lack of empathy

- Task avoidance, challenging behaviour, restlessness/over-activity, non-compliance
- Mood swings, Impulsivity, absconding
- Physical aggression, verbal aggression, perceived injustices, disproportionate reactions to situations
- Difficulties with change/transitions
- Lack of personal boundaries, poor awareness of personal space

#### 4. Roles and Responsibilities

##### Key Staff: -

- Mr J. Barton - Assistant Headteacher (Wellbeing) and Designated Safeguarding Lead
- Miss K. Smith - Child Protection Officer
- Mrs D. Hennell - Inclusion Manager and Senior Mental Health Lead
- Miss C. Burrows - Head of RE, Citizenship and PSHE (ICE)
- Mrs B. Cruickshank - Attendance Officer
- Mr D. Brown, Mrs H. Atkin, Mrs J. Cutillo, Miss A. Sharp and Mrs L. Preston - Year Group Learning Managers
- Miss C. Fretwell - SLT Lead for Staff CPD and Training

The **senior mental health lead** in liaison with the Headteacher and Assistant Headteacher responsible for student wellbeing is responsible for:

- Overseeing the whole-school approach to mental health, including how this is reflected in the school's own curriculum and development plan and how the school engages students and parents with regards to students' mental health and awareness.
- Coordinating with the SENCO and learning managers to provide a high standard of care to students who have SEMH difficulties.
- Being a key point of contact with external agencies, especially the mental health support teams, school nursing team and other relevant agencies.
- Providing professional guidance to colleagues about mental health and working closely with staff members, parents and other agencies, including local community groups and charities where appropriate.
- Referring students with SEMH difficulties to external services, e.g. With Me in Mind, to receive additional support where required.
- Overseeing the outcomes of interventions on students' education and wellbeing.
- Liaising with parents of students with SEMH difficulties, where appropriate.
- Liaising with other schools, the emotional wellbeing team which includes the educational psychologist, health and social care professionals, and independent or voluntary bodies where appropriate.

**Identifying where wellbeing concerns represent safeguarding concerns is the role of all staff employed at Baysgarth School.** Where mental health and wellbeing concerns could be an indicator of abuse, neglect or exploitation, the school will ensure that appropriate safeguarding referrals are made in line with the **Child Protection and Safeguarding Policy**. Any member of staff who is concerned about the mental health or wellbeing of a student should report the concerns through CPOMs in the first instance. If there is a fear that the student is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the Child Protection Officer, DSL or DDSL.

If the student presents a medical emergency then the normal procedures for medical emergencies should be followed, including alerting the first aid staff and contacting the emergency services if necessary.

The school works in collaboration with **With Me in Mind** who are trained mental health professionals who act as a bridge between schools and the Child and Adolescent Mental Health Services (CAMHS).

## 5. Staff Training

The SLT ensures that all teachers have a clear understanding of the needs of all students, including those with SEMH needs.

The SLT promotes CPD to ensure that staff can recognise common symptoms of mental health problems, understand what represents a concern, and know what to do if they believe they have spotted a developing problem.

Training opportunities for staff who require more in-depth knowledge will be considered as part of our CPD programmes. Further support and guidance for staff will be delivered throughout the year where it becomes appropriate due to developing situations with one or more students.

Suggestions for individual, group or whole school CPD should be discussed with Miss C. Fretwell who can also highlight sources of relevant training and support for individuals as needed.

## 6. Identification and measurement tools

School staff may become aware of warning signs which indicate a student is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with appropriate staff within school.

There are a range of options for identifying where students might need extra support, and for helping schools to understand what sort of support might be suitable, including working with external agencies.

When the school suspects that a student is experiencing mental health difficulties, the following graduated response is employed:

- An assessment is undertaken to establish a clear analysis of the student's needs
- A plan is set out to determine how the student will be supported
- Action is taken to provide that support
- Regular reviews are undertaken to assess the effectiveness of the provision, and changes are made as necessary

This can happen whilst we are gathering further evidence, and the student's response to that support can help further identify their needs.

Tools such as the Strengths and Difficulties Questionnaire (SDQ), the Boxall Profile and the Thrive profiling and screening tool are used through this process. In addition to informing decisions on whether to seek specialist support, they can also provide a basis for ascertaining whether the initial intervention is working or whether something different needs to be tried.

In some cases, it is helpful to draw up an **Individual Healthcare Plan (IHP)** for students who receive a diagnosis pertaining to their mental health. This should be written with the

involvement of the student, the parents and relevant health professionals. The IHP should include:

- Details of a student's condition
- Special requirements and precautions
- Medication and any side effects
- What to do, and who to contact in an emergency
- The role the school can play

There will be situations where it is necessary to complete a **Risk Assessment** for a student in response to concerns about their welfare and/or wellbeing. In these cases, the risk to that student's welfare/wellbeing will be assessed, appropriate action will be taken to reduce the risks identified, this will then be recorded and regularly monitored and reviewed.

Risk assessments do not have to be complicated. The level of detail contained in them should be relevant to the level of risks involved. In many cases a risk assessment will lead to clarification and documenting of protocols and procedures that are already in place.

The information obtained through this process and the action agreed will then be shared, as appropriate, with other staff, parents and other relevant third parties in order to safeguard and promote the welfare of a particular child or of students generally.

## 7. Supporting Students

The skills, knowledge and understanding needed by our students to keep themselves and others physically and mentally healthy and safe are included as part of our ICE curriculum.

The specific content of lessons will be determined by the specific needs of the cohort being taught but there will always be an emphasis on enabling students to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

Through the ICE curriculum, students are taught how to:

- Build self-esteem and a positive self-image.
- Foster the ability to self-reflect and problem-solve.
- Protect against self-criticism and social perfectionism.
- Foster self-reliance and the ability to act and think independently.
- Create opportunities for positive interaction with others.
- Get involved in school life and related decision-making.

When a student is suffering from mental health issues, it can be a difficult time for their friends. Friends often want to support but do not know how. In the case of self-harm or eating disorders, it is possible that friends may learn unhealthy coping mechanisms from each other. In order to keep peers safe, we will consider on a case by case basis which friends may need additional support. Support will be provided either in one to one or group settings led by With Me in Mind practitioners or Learning Managers.

In situations where students present with a new emerging issue we would always encourage students to access school based support in the first instance. This could include;



- Form tutor support
- Learning Manager support (All staff hold a counselling diploma)
- Signposting to E-Clinic App for both students and parents
- Suggestion of a Peer Mentor
- Social skills intervention
- Self Help Tools / Websites

## **8. Working with Parents**

The school will work with parents wherever possible to ensure that a collaborative approach is utilised which combines in-school support with at-home support. Evidence shows that where support is provided to help manage behaviour at home, alongside work being carried out with the child at school, there is a much greater likelihood of success in reducing the child's problems, and in supporting their academic and emotional development.

Whilst it is good practice to involve families wherever possible, in some circumstances the child or young person may not wish to have their families involved with any interventions or therapies they are receiving. In these cases parents should be aware that those aged 16 or over are presumed to be capable of consenting to their own medical treatment. Children under the age of 16 may, in certain circumstances, consent to their own treatment if they are deemed to be 'Gillick competent'.

Where it is deemed appropriate to inform parents, we need to be sensitive in our approach. It can be shocking and upsetting for parents to learn of their child's issues and many may respond with anger, fear or upset during the first conversation. We should be accepting of this (within reason) and give the parent time to reflect. We would always highlight further sources of information as we recognise that parents will often find it hard to comprehend what is being said in the moment. Sharing sources of further support aimed specifically at parents can also be helpful too.

The school ensures that students and parents are aware of the mental health support services available from the school and the universal offer in the community including GP, NHS Services, and Voluntary Organisations.

We would always provide parents with clear means of contacting us with further questions and consider arranging a face to face meeting or further phone call as parents often have many questions as they process the information.

### **How we ensure best practice:**

- Parents are recognised for their significant contribution to children and young people's mental health.
- Parents are welcomed, included and encouraged to work in partnership with schools and agencies.
- Parents are provided with opportunities where they can ask for help when needed.
- Parents are signposted to appropriate agencies for support.
- Parents are clear about their roles and expectations of their responsibilities in working in partnership with school.
- Parents' opinions are sought and valued and responded to.
- Parents' own strengths and difficulties are recognised, acknowledged and challenged appropriately.

## 9. Collaborative Working with Other Agencies

Early intervention to identify issues and provide effective support is crucial. At Baysgarth School we try to recognise emerging issues as early and accurately as possible. Where possible we want to help students to access evidence based early support and interventions and have access to specialist support in a timely manner.

It is important that children are provided with support as soon as a problem emerges, at any point in their life. Providing early help is more effective in promoting the welfare of children than reacting later. We aim to work effectively with external agencies to provide swift access or referrals to specialist support and treatment.

We will ensure that staff, students and parents are aware of sources of support within school and in the local community. The support available within our school and local community with details of who the support is aimed at and where the support can be accessed is detailed in Appendix A for school-based support, Appendix B for External support and Appendix C for online and app-based support.

We will display relevant sources of support in the school's communal areas such as student support, corridor displays, tutor displays, tutor powerpoints, toilets and social media and will regularly highlight sources of support to students within relevant parts of the curriculum.

Whenever we highlight sources of support (either physically or virtually), we will increase the chance of student help-seeking by ensuring students understand:

- What help is available
- Who it is aimed at
- How to access it
- Why to access it
- What is likely to happen next

## 10. Supporting Staff

At **Baysgarth School** we review the mental health and wellbeing of all staff regularly.

We aim to create a mentally healthy environment where staff:

- Have their individual needs recognised and responded to in a holistic way
- Have a range of strategies that support their mental health, e.g. a named person to speak to, signposting, annual calendared staff wellbeing time/events, option for specialist supervision.
- Have recognition of their work-life balance including continued consultation with staff regarding decision making with regards to the 1265 and Term Dates.
- Are encouraged to establish a staff wellbeing team with feedback from the team to SLT
- Staff wellbeing remains a crucial part of the whole school development plan
- Have access to a visible Headteacher who continues to be transparent around school development and is in regular liaison with unions

We aim to make our whole staff team feel valued and have opportunities to contribute to decision making processes. We pride ourselves on celebrating and recognise success.

The Senior Leadership Team ensures that all staff are able to carry out roles and responsibilities effectively and are provided with opportunities for CPD both personally and professionally including access to Mental Health First Aid Training.

Through our CPD programmes, Inspire and enrichment programmes we provide opportunities for staff to have their unique talents and skills recognised and opportunities are provided for development.

Where staff require additional support to manage their own mental health the Senior Leadership Team will support staff to access proactive strategies and systems to support them at times of emotional needs in both the short and long term including return to work processes after absences.

## 11. Appendix

### Appendix A - School Based Support

- A Nurture based curriculum is provided for students, identified through the transition process, as requiring additional support for SEMH difficulties which are likely to be exacerbated by attending a fulltime KS3 curriculum at the beginning of Y7.
- Provision of SEMH learning opportunities through the ICE curriculum which aim to raise awareness of SEMH issues and provide coping strategies to support students with emerging SEMH difficulties.
- Short term interventions including:-
- Social skills training, Thrive Approach, small group sessions focussing on developing cognitive skills and positive social behaviour.
- Peer Mentoring
- **Who's in Charge?** is a 9 week child to parent violence (CPV) programme aimed at parents whose children are being abusive or violent toward them or who appear out of parental control. The structure of the programme consists of 8 two and a half hour sessions with a two-month follow up.
- Form tutor support
- Learning Manager support (All staff hold a counselling diploma and offer talking therapy)
- Drawing and Talking Therapy *The Drawing and Talking therapeutic approach allows individuals to discover and communicate emotions through a non-directed technique.*

### Appendix B - External Support (Referral criteria apply)

When in-school intervention is not appropriate, referrals and commissioning support will take the place of in-school interventions. The school will continue to support the student as much as possible throughout the process. We currently work with:-

- **Emotional Health and Well-being team** (*Autism Spectrum Education Team, Complex Behaviour Team, Educational Psychology*)
- **With Me in Mind**
- Signposting to E-Clinic App for both students and parents

### Appendix C - Apps, Online Support and Further Reading

There is a wide range of apps, online support and further reading covering mental health problems most commonly seen in school-aged children and young people. Some resources are aimed at children and/or young people experiencing mental health problems, whilst others are suited to parents/carers and school staff supporting a child or young person.

Some of the apps and other resources may be helpful for more than one specific issue.

## General Mental Health & Wellbeing

### Apps

- **eQuoo:** a storyline and skills game which supports the development of resilience, personal growth and interpersonal relationship skills. <https://www.equoo.com/>
- **MeeToo:** a safe and secure forum for teenagers wanting to discuss any issue affecting their lives. <https://www.meetoo.help>
- **ThinkNinja:** a mental health app designed for 10 to 18 year olds. Using a variety of content and tools, it allows young people to learn about mental health and emotional wellbeing and develop skills they can use to build resilience and stay well. [App Store](#) [Google Play](#)

### Online Support

- **Hub of Hope:** a mental health database of local, national, peer, community, charity, private and NHS support. <https://hubofhope.co.uk/>
- **ChildLine:** information, advice, support and tools for children and young people up to 19 years old. 0800 1111 [www.childline.org.uk](http://www.childline.org.uk)
- **Kooth:** free online counselling for 10-18 year olds. <https://www.kooth.com/>
- **The Mix:** advice, blogs, articles and 1-2-1 online chat and messenger options for older teens and young adults. 0808 808 4994 [www.themix.org.uk](http://www.themix.org.uk)
- **Muslim Youth Helpline:** non-judgemental, confidential support 7 days a week, 365 days a year including bank holidays and Eid. [www.myh.org.uk](http://www.myh.org.uk)
- **Shout:** a free, confidential and anonymous text support service. Txt 85255 <https://giveusashout.org/get-help/>
- **YoungMinds:** mental health support for young people and their parents / carers <https://www.youngminds.org.uk/>

## Anxiety, panic attacks and phobias

Anxiety can take many forms in children and young people, and it is something that each of us experiences at low levels as part of normal life. When worrying thoughts, overwhelming anxiety, fear or panic are repeatedly present over several weeks or months and negatively impact a young person's ability to access or enjoy day-to-day life, intervention is needed.

### Apps

- **Chill Panda:** Tasks include simple breathing techniques and light exercises to take your mind off your worries. <http://chillpanda.co.uk>
- **Worry Tree:** Uses cognitive behavioural therapy (CBT) techniques to help notice and challenge worries and create an action plan for managing worry. <https://www.worry-tree.com/>

- **Thrive:** helps prevent and manage stress, anxiety and related conditions. The game based app can be used to relax before a stressful situation or on a more regular basis. <https://thrive.uk.com/>

#### Online support

- **Anxiety UK:** A range of free and paid for self-help resources. [www.anxietyuk.org.uk](http://www.anxietyuk.org.uk)  
[Free anxiety resources from anxietyuk.org.uk](http://www.anxietyuk.org.uk)

#### Books

- Lucy Willetts and Polly Waite (2014) *Can I Tell you about Anxiety?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers.
- Carol Fitzpatrick (2015) *A Short Introduction to Helping Young People Manage Anxiety*. London: Jessica Kingsley Publishers.

#### Depression

Ups and downs are a normal part of life, but for someone who is experiencing depression, negative thoughts, feelings of failure, hopelessness, numbness or sadness may affect functioning over an extended period, having a significant impact on behaviour, motivation and ability to engage in day-to-day activities.

#### Apps

- **Catch It:** Learn how to manage feelings like anxiety and depression with Catch It. The app will teach you how to look at problems in a different way. <https://www.liverpool.ac.uk/it/app-directory/catch-it/>
- **MoodTools:** A free app for managing depression with mood tracker, videos, meditations and thought diary. <https://www.moodtools.org/>

#### Online support

- **The Campaign Against Living Miserably (CALM)** 0800 585858 [Get Help On: Depression](http://www.thecalmzone.net/)  
<https://www.thecalmzone.net/>

#### Books

- Christopher Dowrick and Susan Martin (2015) *Can I Tell you about Depression?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers.
- Nadja Reilly (2015) *Anxiety and Depression in the Classroom: A Teacher's Guide to Fostering Self-Regulation in Young Students*. London: W.W. Norton & Company.

#### Self-harm

Self-harm describes any behaviour where a young person causes harm to themselves in order to cope with thoughts, feelings or experiences they are not able to manage in any other way. It most frequently takes the form of cutting, burning or non-lethal overdoses in adolescents, while younger children and young people with special needs are more likely to pick or scratch at wounds, pull out their hair or bang or bruise themselves.

#### Apps

- **Blue Ice:** an evidence based app to help young people manage their emotions and reduce urges to self-harm. <https://www.oxfordhealth.nhs.uk/blueice/>
- **Calm Harm:** an app designed to help people resist or manage the urge to self-harm. <https://calmharm.co.uk/>
- **Self-Heal:** A free app to help with the management of self-harm. Includes distraction task suggestions, useful contacts, information on self-harm and a gallery of inspirational images. <http://www.self-healapp.co.uk/>

#### Online support

- **Alumina (Formerly Self Harm UK):** Free self-harm support for 14-19 year olds. <https://alumina.selfharm.co.uk/>
- **Harmless:** Provide a range of services to support people who self-harm, and those that support them. <https://harmless.org.uk/>
- [A Guide for Young People – Self Harm](#) from [Young Minds](#)
- [Information and Support - Self-Harm](#) from [Mind](#)

#### Books

- Tina Rae and Jody Walshe (2015) *Understanding & Preventing Self-Harm in Schools: Effective Strategies for Identifying Risk and Providing Support*. Buckingham: Hinton House.
- Carol Fitzpatrick (2012) *A Short Introduction to Understanding and Supporting Children and Young People Who Self-Harm*. London: Jessica Kingsley Publishers
- Keith Hawton and Karen Rodham (2006) *By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents*. London: Jessica Kingsley Publishers.

#### Suicidal thoughts

Young people may experience complicated thoughts and feelings about wanting to end their own lives. Some young people never act on these feelings though they may openly discuss and explore them, while other young people die suddenly from suicide, apparently without any warning.

#### Apps

- **distrACT:** easy, quick and discreet access to information and advice about self-harm and suicidal thoughts. <https://www.expertselfcare.com/health-apps/distract/>
- **Stay Alive:** a pocket suicide prevention resource for the UK, packed full of useful information. Can be used by individuals who are having thoughts of suicide or if you are concerned about someone else who may be considering suicide. <https://www.prevent-suicide.org.uk/find-help-now/stay-alive-app/>

#### Online support

- **Samaritans:** Young People and Suicide. <https://www.samaritans.org/about-samaritans/research-policy/young-people-suicide/>

- **Papyrus:** prevention of young suicide.

[www.papyrus-uk.org](http://www.papyrus-uk.org)

- **The Campaign Against Living Miserably (CALM):** helpline support and webchat  
0800 585858

<https://www.thecalmzone.net/>

#### Books

- Terri A. Erbacher, Jonathan B. Singer and Scott Poland (2015) *Suicide in Schools: A Practitioner's Guide to Multi-level Prevention, Assessment, Intervention, and Postvention*. New York: Routledge.

#### Obsessions and compulsions

Obsessions are intrusive thoughts or feelings which are disturbing or upsetting; compulsions are the behaviours carried out in order to manage those thoughts or feelings. For example, a young person may be constantly worried that their house will burn down if they don't turn off all switches before leaving the house. They may respond to these thoughts by repeatedly checking switches, perhaps returning home several times to do so.

#### Online support

- **OCD UK:** advice, information, and support services for those affected by OCD.

[www.ocduk.org/ocd](http://www.ocduk.org/ocd)

- **OCD Youth:** aims to increase awareness and access to support for anyone under 25 affected by OCD.

<https://ocdaction.org.uk/ocd-youth/>

#### Books

- Amita Jassi and Sarah Hull (2013) *Can I Tell you about OCD?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers.
- Patricia Rice Doran (Ed) (2016) *PANDAS and PANS in School Settings: A Handbook for Educators*. London: Jessica Kingsley Publishers.

#### Eating problems

Problems with eating, along with preoccupation with weight and shape, may develop as a way of coping with difficult emotions or experiences. Some young people develop eating disorders such as anorexia (where food intake is restricted), or bulimia nervosa (a cycle of bingeing and purging). Early intervention is crucial to protect physical and mental health.

#### Apps

- **Recovery Record:** Technology-enabled best practice for eating disorder treatment.

<https://www.recoveryrecord.co.uk/>

#### Online support

- **Beat Eating Disorders:** helplines, chatrooms and resources.

<https://www.beateatingdisorders.org.uk/>

- NHS Advice for parents: eating disorders.

<https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/advice-for-parents/>

- **SEED Support and Empathy for people with Eating Disorders:** helplines, peer support, text support and resources.

<https://seed.charity/services/>

#### Books

- Bryan Lask and Lucy Watson (2014) *Can I tell you about Eating Disorders?: A Guide for Friends, Family and Professionals*. London: Jessica Kingsley Publishers.
- Pooky Knightsmith (2015) *Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies*. London: Jessica Kingsley Publishers.

For further e-learning opportunities [MindEd](#) is a free educational resource hub on children, young people and adult mental health.