

## ***Count Us In: Mind Over Matter***

Promoting and Supporting Mental and Emotional Wellbeing

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# 1. Introduction

This guide is part of the **Count Us In** online resource that gives the professional view of HMIE on the strengths and best practice in implementing inclusion and equality across education in Scotland, and sets out what needs to be done now to improve. It is designed to be used by all who work with children, young people and adult learners to assist them in reflecting on their current practice and in improving that practice to meet the needs and aspirations of all in Scottish society.

The aim of this guide is to share the current good practice that is happening in our pre-school centres, schools and colleges in promoting and supporting children and young people's mental and emotional wellbeing. We hope it will stimulate professional reflection and dialogue that will help you to improve further your practices in this important aspect of every establishment's life and work.

## Context

One in four of us are affected by mental health difficulties at some point in our lives. <sup>1</sup>One in 12 children and young people in Scotland have mental health difficulties that are so substantial that he/she may have difficulties with their thoughts, their feelings, their behaviour, their learning and their relationships on a day-to-day basis. It can be calculated that in any secondary school of 1,000 pupils there are likely to be:

- 50 pupils who are seriously depressed;
- 100 who are suffering significant distress;
- 1-20 pupils with an obsessive compulsive disorder (OCD); and
- 5-10 girls with an eating disorder.<sup>2</sup>

A number of factors may put some young people more at risk in terms of their mental wellbeing:

- **loss or separation** e.g. as a result of death, parental separation or divorce, family breakdown;
- **significant life events** e.g. moving house, changing schools, accidents; and
- **trauma** e.g. violence, abuse, neglect.

The range of mental health disorders which can affect young people include:

- **emotional disorders** - just over 3% of young people suffer from anxiety.<sup>3</sup> As indicated above a number of young people experience depression. Problems which can stem from depression include deterioration in achievement, social withdrawal and school refusal, self-harming behaviour and increased risk of suicide;
- **conduct disorders** - just under 6% have a conduct disorder;<sup>4</sup>
- **hyperkinetic disorders** - approximately 2% of young people<sup>5</sup> have hyperkinetic disorders which affect their behaviour and attention, including those with Attention Deficit Hyperactivity Disorder (ADHD); and
- **eating disorders** - including anorexia, bulimia and binge eating. It is difficult to calculate number in this area as we only have figures for those who seek medical help.<sup>6</sup>

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<sup>1</sup> World Health Organisation Report (2001)

<sup>2</sup> *Mental Health Services for Adolescents and Young Adults Young Minds* (2003)

<sup>3</sup> Office of National Statistics (2004)

<sup>4</sup> Office of National Statistics (2004)

<sup>5</sup> Office of National Statistics (2004)

Some groups of young people are more at risk. For example, young people who are looked after away from home are twice as likely to experience mental health problems compared to young people who are not looked after. A high number of young people in the youth and criminal justice system experience mental health problems. Most young carers are not known as such by staff in establishments and being a carer can affect young people's attendance, achievement, concentration and anxiety levels.

Other young people who may be more at risk include those with learning difficulties, language and communication difficulties and those with long term medical conditions. A wide variety of factors may contribute to mental health problems of certain groups. Young people who are asylum seekers and refugees, those experiencing racism, discrimination or persistent bullying and gay lesbian and transgender young people may be affected by mental health problems.

### **National policy and guidance**

The Scottish Government's National Programme for *Improving Mental Health and Wellbeing 2003-2006*<sup>7</sup> set out the strategy to improve the mental health and wellbeing of people in Scotland. In May 2009, building on the achievements of the programme, Scottish Government published the policy overview *Towards a Mentally Flourishing Scotland*.<sup>8</sup> This document presents the proposed future direction of mental health improvement until 2011. Priorities identified within this include: promoting the mental health of young people; reducing the prevalence of suicide; self-harm; common mental health problems and improving the quality of life of those experiencing mental health problems and mental illness.

The *Equally Well*<sup>9</sup> report notes the impact of key factors, such as, poverty on overall health and life expectancy and emphasises the importance of intervention in the very early years. The *Early Years Framework* outlines the Scottish Government's commitment to giving young people the best start in life through promoting and supporting parents and parenting skills and supporting relationships between parents and young people.

The policy document *The Mental Health of Children and Young People: A Framework for Promotion, Prevention and Care*<sup>10</sup> provides a planning and audit tool outlining service elements, actions and outcomes required to address these recommendations which are expected to be in place by 2015. The framework is about a shared vision for children and young people's mental health and it is about joint leadership, planning and delivery. It supports the principal of mental health promotion for all.

In 2008, Scottish Government published *A Guide to Getting It Right For Every Child (GIRFEC)*.<sup>11</sup> *Getting it right* provides a set of guiding principles for effective joint working to meet the needs of children and young people. Fundamental to effective practices is the sharing of information by all those supporting children and young people to help decision making about how best to meet their needs. A series of practice briefings<sup>12</sup> has been written

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<sup>6</sup> *Eating Disorders: Core Interventions in the Treatment and Management of Anorexia Nervosa, Bulimia Nervosa and Related Eating Disorders NICE Guidance* (2004)

<sup>7</sup> <http://www.scotland.gov.uk/Publications/2003/09/18193/26506>

<sup>8</sup> <http://www.scotland.gov.uk/Publications/2009/05/06154655/5>

<sup>9</sup> <http://www.scotland.gov.uk/Publications/2008/06/09160103/0>

<sup>10</sup> <http://www.scotland.gov.uk/Publications/2005/10/2191333/13337>

<sup>11</sup> <http://www.scotland.gov.uk>

<sup>12</sup> <http://www.scotland.gov.uk/gettingitright>

to help practitioners and managers put *Getting it right for every child* into practice in their agencies.

Specialist Child and Adolescent Mental Health Services (CAMHS) comprise of multi-professional teams with expertise in the assessment, care and treatment of children and young people experiencing mental health problems. Standards for integrated care pathways for children and adolescent mental health are being developed currently. The standards will inform service providers, children, young people and families using the services what to expect in terms of the range of support that may be available to them.

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The Schools (Health Promotion and Nutrition) Act 2007 places health promotion, including mental health promotion, at the heart of schools' activities.

Health and wellbeing within *Curriculum for Excellence* reinforces the importance of health promotion. The purposes of learning in health and wellbeing includes enabling young people to:

- *make informed decisions in order to improve their mental, emotional social and physical wellbeing;*
- *experience challenge and enjoyment;*
- *experience positive aspects of healthy living and activity for themselves;*
- *apply their mental, emotional and physical skills to pursue a healthy lifestyle;*
- *make a successful move to the next stage of education or work; and*
- *establish a pattern of health and wellbeing which will be sustainable into adult life, and which will help to promote the health and wellbeing of the next generation of Scottish children.*<sup>13</sup>

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<sup>13</sup> *Curriculum for Excellence: Health and Wellbeing Principles and Practice*

The framework for health and wellbeing within *Curriculum for Excellence* takes account of the features of the learning environment which support health and wellbeing. These include a positive ethos and positive relationships, and participation in out-of-class activities which promote a healthy lifestyle. Delivery of the experiences and outcomes relating to mental, emotional and social wellbeing are the responsibility of all staff.

The World Health Organisation definition for mental health is:

*The capacity of each and all of us to feel, think and act in ways that enhance our ability to enjoy life and deal with the challenges we face. It is a positive sense of emotional and spiritual wellbeing that respects the importance of culture, equity, social justice, interconnections and personal dignity.*

*Curriculum for Excellence* endorses this definition for mental health.

The mental health framework<sup>14</sup> emphasises:

*The need to address the whole continuum of mental health – from mental health promotion, through preventing mental illness, to supporting, treating and caring for those children and young people experiencing mental health difficulties of all ranges of complexity and severity.*

In the autumn of 2009, HMIE was asked by the Minister for Children and Early Years, to carry out a review on how the Education (Additional Support for Learning) (Scotland) Act 2004 ('the Act') is affecting specific groups of children and young people with additional support needs. The report, *Review of Additional Support for Learning Act: Additional benefits for learners* HMIE 2010<sup>15</sup> considers how the 2004 Act is working now for children and young people with additional support needs relating to: being looked after; being a young carer; having mental health disorders; and having sensory impairments.

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<sup>14</sup> *The Mental Health of Children and Young People: A Framework Promotion, Prevention and Care* 1.3

<sup>15</sup> [www.hmie.gov.uk](http://www.hmie.gov.uk)

## 2. How good are we at promoting the mental and emotional wellbeing of all?

### What we are doing well

- Creating a positive ethos characterised by positive relationships and mutual respect between learners and staff.
- Ensuring that children and young people feel that there is at least one adult who knows them well, listens to them, and supports them to set goals and make good choices.
- Providing safe and secure environments that promotes positive behaviour and a sense of responsibility towards others.

Successful whole-school approaches for promoting positive mental wellbeing for all are built on a framework that includes school ethos, relationships, curricular and interdisciplinary learning as well as opportunities for personal achievement. Over the past seven years, through taking account of what it means to be a health promoting school,<sup>16</sup> schools have improved their understanding of the positive influence they can have on children's health and wellbeing.

Evidence from inspections over the past five years show us that in almost all pre-school centres, schools and colleges, staff have established a positive ethos. Children and young people are benefitting from being part of an inclusive community in which there are positive relationships with staff and their peers. In best practice, senior managers create a culture in which each adult and young person is valued. They involve staff and young people in establishing effective approaches to positive relationships, behaviour and promoting a sense of security and trust. The impact is that children and young people feel engaged in learning and decision making. Staff take account of their views in classes and they have access to individual support which meets their needs. Increasingly, schools are developing young people's skills in supporting others through acting as peer supporters or buddies. Young people involved in these activities feel that this is helping them to show responsibility and develop interpersonal skills. In the most successful examples, high-quality training is provided for peer mentors and there is strong collaboration with staff.

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<sup>16</sup> *Being Well - Doing Well, A Framework for Health Promoting Schools in Scotland: Scottish Health Promoting Schools Unit, Learning and Teaching Scotland (2004)*

Children and young people perceive that being listened to and heard helps them to feel valued and promotes their wellbeing. They appreciate it when adults give them choices and encourage them to take responsibility. Increasingly, class teachers in secondary schools are taking on a mentoring or key adult role, working with small tutorial groups. Young people feel that these adults know them well as a person and they feel comfortable in approaching them for support and advice.

*Curriculum for Excellence* is reinforcing the importance of promoting and recognising personal achievement to enable children and young people grow in confidence and self-esteem and to help them build resilience. Increasingly, staff are providing young people with opportunities to make choices about what they are learning that take good account of personal interests and aptitudes.

Overall, schools are effective in supporting the mental and emotional needs of young people at times of transition from pre-school to primary and primary to secondary. Support for transitions from school to ensure young people go into positive sustained destinations are more variable. There is considerable scope to ensure that more is done to support the multiple transitions experienced by young people whose learning is interrupted, who receive part of their education in another setting and who are moving from child to adult services. In the best practice, schools take very good account of individual needs, plan early and fully involve young people and parents.

Many establishments are using strategies, involving holistic, interdisciplinary and partnership approaches to support the mental and emotional wellbeing of young people and staff. There is growing understanding that providing effective support for emotional and social needs has a positive impact in terms of achievement and academic attainment. Schools are increasingly giving better attention to promoting children and young people's emotional wellbeing across the curriculum. Psychological Services contribute significantly to helping establishments support young people's mental health and wellbeing. Educational psychologists help to identify, plan and deliver interventions to meet the needs of young people. They also assist in addressing the training needs of staff. Psychologists help staff to increase their understanding of a range of positive and preventative interventions including solution focussed and restorative approaches, attachment and resilience, self-regulation and anger management. Effective professional development takes good account of the essential role of all staff in modelling the skills and behaviours they are seeking to develop in young people.

In pre-school centres and schools, staff have started to develop their health and wellbeing programmes using the experiences and outcomes of *Curriculum for Excellence*.<sup>17</sup> Programmes in schools visited covered appropriate themes in relation to mental and emotional wellbeing, for example, anti-bullying, emotional wellbeing and substance misuse. Improved approaches to learning and teaching that involve children and young people more actively in learning are giving them opportunities to understand their own and others' emotions, respond to social situations and form relationships with others.

Partner agencies, including voluntary organisations make a valuable contribution to health and wellbeing programmes through providing resources, visiting establishments and giving advice and support. The Scottish Government has provided funding for a range of campaigns and support materials which can be used in schools and colleges. The 'See me' campaign is run by an alliance of five mental health charities and aims to address the stigma

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<sup>17</sup> <http://www.ltscotland.org.uk/understandingthecurriculum/whatiscurriculumforexcellence/index.asp>



and discrimination associated with mental health. However, staff are not always planning or delivering the programmes in a way that enables young people to develop their skills in health and wellbeing in a progressive way as they go from pre-school to primary, primary to secondary and secondary to further education or the world of work.

### **What we need to do better**

- Have a whole-school strategy that sets out agreed approaches to promoting mental, social and emotional wellbeing.
- Provide training and support for staff on how best to develop social and emotional wellbeing.
- Have more effective arrangements in place to support young people who experience multiple transitions as a result of interrupted learning or who receive part of their education in another setting and those who are moving from child to adult services.

### **Issues to consider:**

How effective are our approaches to promoting good emotional and mental health? How do we know?

How good are we currently at assessing and tracking the mental and emotional wellbeing of young people and staff?

How are we ensuring that staff feel confident in promoting and supporting mental and emotional wellbeing?

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School: Raigmore Primary School, Highland

Focus: **An ethos of mutual respect where young people feel listened to and helped to make good choices**

The headteacher has provided strong leadership in relation to health and wellbeing and emotional literacy. Key importance is placed on the health and wellbeing of staff as well as young people. Staff act as 'emotional warriors' in providing support to peers. They regularly discuss young people's wellbeing and all staff have undertaken relevant professional development, e.g. in active listening, promoting positive relationships and coaching skills, attachment and resilience. This has resulted in a shared understanding and consistent approaches to promoting and supporting mental and emotional wellbeing. The school uses 'check-ins' to enable young people to get in the frame of mind for learning in the morning, after intervals and after lunch. Young people lead these 'check-ins' where they discuss their feelings and what has happened to them in and out of school. They explore issues affecting them, celebrate individual success, reflect on their actions and decisions and try to find solutions to problems with their classmates. These activities help them to be aware of their own emotions and reactions and those of others and they are able to talk about their feeling and develop empathy. Approaches to 'check-in' have also resulted in earlier identification of individual needs, earlier intervention and staff developing a more holistic view of individual young people.

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School: St Luke's High School, East Renfrewshire

Focus: **Promoting personal achievement**

Young people learn very well from an exceptionally wide range of opportunities for personal achievement. Their achievements are monitored carefully and they are encouraged to develop skills through a range of activities which best meet their needs. Teachers consistently recognise young people's successes through local and national prizes and awards, including Barrhead Young Citizen of the Year, Youth Scotland awards, and a range of in school awards. Most young people take part in activities in school which develop their confidence and help them to contribute effectively to society. For example, young people participate in local community improvement groups and anti-sectarianism projects. Many others develop these skills in the community, which the school monitors. High numbers of young people develop confidence and responsibility through taking part in sporting and cultural activities such as school shows, charity and fundraising groups and football and netball teams. They learn well from taking part in outward bound activities, musical trips to Europe and a pilgrimage to Lourdes.

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College: Angus College, Angus

Focus: **A culture of respect**

In consultation with learners, Angus College took the decision to change the culture of the college through a high profile campaign: 'Take 5' which emphasises mutual respect and value. Learners and staff are encouraged to take 5 minutes out of their day to '*promote and demonstrate: respecting; giving; achieving and considering others*'. This campaign promotes and celebrates positive behaviour, stressing individual responsibility and the duty of care to report incidents that infringe the code of conduct.

## Growing Confidence Project, Edinburgh City Council

### Focus: **Using evaluation tools to assess, track and measure school approaches to supporting social and emotional development**

The City of Edinburgh's 'Growing Confidence' project has worked with partner agencies to develop a *Pupil Wellbeing Questionnaire* for P3-P7 young people. Over the last three years, the tool has been piloted and developed in a number of primary schools. The four key areas explored are: 1. Self respect and confidence; 2. Resilience and coping skills; 3. Empathy and relationships; and 4. School ethos and culture.

Questions link to the health and wellbeing outcomes of *Curriculum for Excellence*. Responses help staff teams identify key strengths and areas for development in their individual schools.

*"The Pupil Wellbeing Questionnaire was really useful for staff. It really generated interesting discussions as to why pupils might have answered the questions in the way they did and what we could do about it. We have taken the findings back to the pupil council and asked them to take it to their individual classes and give us feedback. This has helped us to identify areas of priority and make significant changes as a result."*

Headteacher

Staff also complete an annual staff wellbeing questionnaire. This is used to target improvements in relation to staff wellbeing.

### Focus: **Confident Staff, Confident Children**

'Growing Confidence' has developed multidisciplinary training programmes for staff to support the promotion of positive mental health in themselves and others through a 21 hour CPD programme. The programme runs on the basis of one full day followed by 7 (2 hour) twilight sessions which cover;

1. Brain development
2. Attachment and Relationships
3. Resilience
4. Developing Empathy
5. Thinking-Feeling-Doing
6. Minding our own Wellbeing
7. Insights and Inspiration

Of the over 600 participants who have taken part in the course so far 88% reported an increase in their understanding of how they could better support their own wellbeing and 84% that of the young people they work with.

### 3. How good are our arrangements for supporting children and young people with mental health difficulties?

#### What we are doing well

- Using staged intervention to assist early identification, appropriate intervention and robust tracking and monitoring of individual needs.
- Deploying school based specialist staff, such as counsellors, mental health workers, home link and youth workers to help meet the needs of individuals.

Establishments recognise the importance of having clear arrangements for supporting children and young people. Where the *Getting it right* approach is implemented, every child has a named person who is the first point of contact for them, their family or others who may wish to discuss a concern about the young person. Most establishments have systems through which members of staff have responsibility to provide personal support to individual learners. In addition, staff with appropriate experience and expertise will provide additional support for learning. The use of staged intervention systems are helping to ensure that young people get the help they need promptly from the most appropriate sources. Early identification of mental health problems often takes place as a result of staff vigilance. However, staff do not apply the same rigour in using staged intervention arrangements to ensure coherent provision for young people experiencing difficulties relating to their mental health. Fewer young people with mental and emotional difficulties, as opposed to learning difficulties, have individualised educational programmes or coordinated support plans despite meeting the criteria for them. Links between displays of challenging behaviour and mental health difficulties are not always recognised and young people can miss out on receiving the help they need quickly enough. Whilst most young people with challenging behaviour will not have a diagnosed mental health illness, they are likely to have particular needs relating to their mental health.

Most establishments have appropriate arrangements in place to track young people's overall progress. These arrangements include monitoring attendance, attainment and personal learning profiles. This enables staff to identify young people experiencing problems and at risk of dropping out. Overall, staff are not yet as confident in identifying and assessing the needs of young people in relation to their mental and emotional wellbeing as they are at identifying and assessing their needs in relation to learning. In examples of best practice, staff are quick to pick up on small changes to attendance, behaviour, mood or progress. Some schools use more formal assessment tools to identify the specific needs of young people. In establishments implementing *Getting it right*, staff produce a single assessment and draw up a plan to identify needs promptly. This is enabling them to take the most appropriate actions to bring about the best outcomes for young people. Educational psychologists provide valuable support in carrying out appropriate assessments to identify needs and to help access other specialist services to meet individual needs. Staff work with colleagues from other agencies to identify the needs of young people early and plan interventions at establishment level that enable young people to make steady progress. However, some establishments feel that there is limited availability to the provision offered by these services and only young people with the most significant needs are getting the opportunity to benefit from them.

Increasingly schools are building capacity to meet specific needs. A growing number of schools, particularly primary schools, have nurture groups to promote children's emotional development. A nurture group provides carefully planned, broad based learning experiences

within a secure environment. Studies<sup>18</sup> carried out on nurture groups in 58 Glasgow schools show that young people in the groups benefitted through improvements to their behaviour, social and emotional wellbeing and achievements. Some schools are using cognitive behaviour approaches (CBA) effectively, supported by educational psychologists, to assist young people work through issues related to stress, anxiety and anger management. A number of schools are taking responsive and flexible approaches to setting up small groups for an agreed period of time to carry out a programme of activities designed to address specific needs. This might include activities around improving self-esteem, assertiveness or anger management groups which may be run by teachers, support assistants, home link workers, psychologists or other staff. Young people affected by bereavement or loss are supported in some schools through 'Seasons for Growth' groups. Overall, staff supporting small groups give good attention to getting feedback on the shorter term benefits of targeted work in groups. However, there is not a sufficient focus on evaluating the longer term impact of the work of the groups on the mental and emotional wellbeing of the young people who attend.

Young people value the support of school based counsellors who provide individual and group counselling to young people. Where appropriate, counsellors undertake family work. They form part of the pupil support team providing consultation, training and support for staff and parents. They build links with mental health services outwith school to facilitate better access for young people to the required services. In the schools visited, counsellors used assessment tools effectively to evaluate the impact counselling was having on those who attended. Most young people are referred as a result of issues relating to family, self esteem, stress or anxiety, relationships, anger, depression, bereavement and bullying.

*The Mental Health of Children and Young People: A Framework for Promotion, Prevention and Care* recommended that all schools should have a designated mental health worker by 2008. Good progress is being made towards meeting this standard. In addition to specialist mental health workers, a school nurse, social worker or other suitable professional can be designated as a school's mental health worker.

Some schools ensure that key members of pupil support teams participate in suitable training to extend their skills in identifying needs and providing appropriate support. For example, staff may undertake training in restorative and solution-focused approaches, counselling skills, emotional literacy, promoting resilience and attachment, self harm, and eating disorders. In most schools visited, educational psychologists supported staff training in mental health and emotional wellbeing. In some areas, school nurses and staff from CAMHS provided useful training, advice and support to schools. However, there is significant scope to improve support and training opportunities for staff to enable them to increase their skills in addressing the needs of children and young people experiencing mental health problems.

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<sup>18</sup> Nurture Groups Report, Glasgow City Council (2007)

## What we need to do better

- Have clear and agreed approaches to identifying, assessing and addressing the needs of children and young people experiencing mental health problems, taking account of the National Practice Model<sup>19</sup>.
- Ensuring that young people are fully involved in planning and decision making in relation to their mental and emotional needs.
- Build the capacity of school staff to meet specific mental health needs.

### Issues to consider

How good are we at identifying and assessing the mental and emotional needs of young people in our school?

In what ways do we promote resilience in young people and help them to develop coping strategies?

To what extent are we responding to the mental health needs of young people through group and one-to-one work?

How effectively are we providing continuous professional development for staff to enable them to address mental health needs?

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<sup>19</sup> See Appendix 2

**School: Kemnay Academy, Aberdeenshire**

**Focus: Extended pupil support team**

The pupil support team organised case conferences around individual young people which staff found useful in working together with the support team and educational psychologist to identify and share strategies to meet individual needs. The meetings were positive and solution focussed.

Young people felt well supported by pupil support staff who took responsibility for coordinating support around their individual needs. Staff offered counselling support and a place to go to relax for young people who needed it.

The school nurse and member of staff with responsibility for promoting positive behaviour provided valued support to young people and families. The school nurse provided a well-used 'drop in' service for young people. She was highly visible and approachable. She knew young people well and communicated effectively with staff, parents and partners to pass on concerns. The member of staff with responsibility for behaviour support provided flexible packages of support tailored to meet individual needs discussed fully with young people and parents. As a result, several young people who had been school refusers were now successfully attending school.

Two family support workers who worked with young people in the primary schools, as well as secondary, provided effective early intervention support for individuals at the time of transition and family support.

A support worker within the local community worked with a targeted group of young people, at risk of missing out, to encourage healthy lifestyles through physical activity. Through an outdoor education programme, he successfully engaged with young people to build their confidence through positive relationships and team building.

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School: Longstone Primary, Edinburgh

Focus: **Using Place2Be**

### **Steps taken to support children's mental health and wellbeing**

The school operates a *Place2Be* centre within the school. *The Place2Be* is an externally resourced and staffed counselling base.

In this school, there were three elements of support provided:

1. *Place2Be* - one to one counselling service for children;
2. *Place2Talk* - informal lunch time 'drop in' service; and
3. *Place4Parents* - support group for parents.

There was universal support for *The Place2Be* amongst the leadership of the school, staff and the pupils themselves. Four years on, it has been established as a central part of the school. Pupils themselves were clear about the role this played in supporting their emotional and mental health and could talk openly about how the systems and structures worked. They identified having someone to really 'listen' without judging as the biggest perceived benefit and all pupils interviewed articulated this in various ways. They also valued the solution focussed approach taken to solving interpersonal difficulties and were able to identify how this may benefit their wider health and wellbeing as they got older. One of the key benefits of the externally-resourced approach seemed to be the perceived difference in role between 'teacher' and 'counsellor'. *Place2Be* staff were perceived as neutral.

Below are a selection of comments from children:

***"Place2Talk helps me sort out my problems. It doesn't tell me what to do but helps me make the right decision."***

***"I used to fight with other boys because I was angry and missing my dad. Now I have somewhere to go when I need to calm down."***

***"I'm much happier now I've been to Place2Be. My work is better and my mum has noticed a difference too."***

#### **Impact:**

- Exclusions had reduced over the four year period since *Place2Be* arrived;
- Staff reported they were less stressed and more able to cope with difficult situations;
- Children overwhelmingly reported they were happier and felt listened to and respected as individuals; and
- There was greater communication and better partnerships with parents.

## 4. How good are we at working together to support mental and emotional wellbeing?

### What we are doing well

- Recognising the range of services provided by the voluntary sector and the flexible programmes of support they offer to meet the needs of young people and families.

Mental illness can affect the whole family. It is important that the support offered to children and young people, takes account of the needs of the whole family. This requires highly effective and responsive partnership working in which the various partners are clear about their respective roles and responsibilities. They need to adopt flexible approaches that help young people and families to receive appropriate support, care and treatment. Across education, social work and health, there is considerable scope to apply *Getting it right* practice principles more rigorously and effectively.

Home-link workers, school based social workers, campus police, youth workers and members of community learning and development teams play important roles in working together to provide targeted support for individual young people in school and in their local community. This is most effective where all those working with a young person are fully involved in planning together and are aware of their respective roles and responsibilities.

Voluntary organisations offer a flexible range of services that enable children and young people to access support both within and outwith the establishment setting. Where this works well, young people have improved attendance at school and a higher rate of attendance at appointments. Support for parents and families is tailored to their specific needs. Children, young people and their parents have been involved in the design of some services and in developing appropriate ways of communicating how services can be accessed by others. Overall, voluntary organisations are working effectively with partners to ensure that the services on offer link to local and national priorities and respond to the needs of service users. Examples of specifically commissioned pieces of work include conducting research and developing projects to support particular groups. However, effective working with the voluntary sector is dependent on each school's knowledge of the organisations operating in their locality and of what they can provide to support young people. The progress made by the young person, through the support they receive from a voluntary organisation, is not always acknowledged or recognised by schools or colleges.

The specialist services provided by CAMHS play an important role in meeting the needs of children and young people with mental health problems. CAMHS are involved in different ways in working with staff in schools, including providing training, advice and support, joint planning and assessment and specialist interventions. Recently, additional funding has been allocated to extend the CAMHS workforce. This will provide scope for CAMHS to develop its role further in working more closely with staff in schools and colleges, as well as working directly with young people and families. Currently, the timescale for children and young people to access support from CAMHS is variable across different authorities. Some children and young people have to wait too long for treatment although priority is generally given to those young people at immediate risk of harm to themselves or others.

Schools are committed to engaging actively with parents and other agencies. However, they are not yet sufficiently involving parents and other agencies in evaluating the quality and impact of partnership working in supporting the mental and emotional wellbeing of young people, particularly in the longer term.

### **What we need to do better**

- Make more effective use of *Getting it right* principles and approaches in working with others to plan, deliver and review the support provided to individuals.
- Improve approaches to evaluating the quality and impact of partnership working in meeting the needs of children and young people with mental health difficulties.

### **Issues to consider**

How effective are our arrangements for listening regularly to the views of young people and their families and to involve them fully in planning and reviewing progress?

How well do we work with partners to meet the needs of families requiring additional support to promote their mental wellbeing?

How successful are we at identifying and using the support of partners and voluntary organisations to support the mental health of young people in our school?

How good are we at evaluating the impact of partnership working in improving the mental and emotional wellbeing of young people and families?

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School: Castlemilk High School, Glasgow

Focus: **Joint Planning with Partners**

A very effective multiagency group reviewed pupils' needs and implemented appropriate strategies to support young people and their families within the community. This group also involved pupils' families in decision making.

The school operates a very effective staged intervention approach to track young people at risk. Such groups meet frequently. Staff in the school are then involved in a joint support team on a regular basis with multiagency teams.

The Health Development worker is dynamic, active and thorough in engaging with schools and centres. She is committed to promote better health outcomes for children, young people and families in the south east of Glasgow. This is complemented by the work of the community health team. Their improvement plan uses the experiences and outcomes from *Curriculum for Excellence* to plan for aspects of their targeted health care work. They are planning for 3-18 outcomes from their joint interventions with education providers, parents and carers. Planning occurs across such issues as obesity, physical activities, addiction, nutrition, sexual health and mental health and wellbeing. This work is clearly set and well targeted involving effective audits and focused on young people' needs.

The Castlemilk Stress Centre provides a range of therapeutic approaches and interventions for individuals and groups including relaxation and stress reduction classes around examination time.

The school has worked well with Strathclyde Police in taking forward Restorative approaches.

CAMHS staff are helpfully involved in planning discussions related to individual young people as part of the school's Joint Support Team.

Centre: Rossie Secure Services, Angus

Focus: **Joint planning to build a relevant curriculum to support mental wellbeing**

Rossie Secure Services made good use of the unit nurse to establish links with CAHMS and the local GP to meet young peoples needs. The quality of assessment of young peoples needs, health care promotion, skills for work and links with the health service and local businesses, allowed staff to meet the diverse needs of these young people effectively. In addition, the service offered more specialist support through the Professional Services Development Officers who offered specific programmes, such as, counselling and family therapy. There was a strong recognition amongst the service that an important factor in supporting young people's mental health was contact with friends and family. Professional Services Development Officers supported this contact well.

They also supported young people well on their return to their families and eased this transition by preparing both parties for the change. They paid particular attention to each young person's overall development in order to improve young people's mental health. They encouraged young people's wider achievements and rewarded achievements through an award system. This helped them to raise self-esteem and confidence in young people as well as to give them coping mechanisms for the stresses in their lives. They were able to work with local football clubs and local schools. They took part in a range of physical pursuits, such as, skiing and gorge walking to tackle mental health problems through physical exercise. The skills for work pathways helped broaden the curriculum and gave young people real opportunities to attain and achieve through employment.

Relationships across the service were very strong and young people felt listened to and that they had a real say in their programme and support. As a result they felt safe, happy and secure in their surroundings.

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## **5. What do we need to do next?**

Here are several key messages for pre-schools and centres, schools and colleges to bring about improvements in the ways we promote and support positive mental health and emotional wellbeing for all young people.

- Establish clear and consistent approaches to promoting positive health and wellbeing for all, taking account of ethos, relationships, curriculum and opportunities for wider achievement.
- Review current approaches to identifying and assessing mental and emotional wellbeing and ensure that staged intervention results in positive outcomes for young people.
- Provide continuous professional development for all staff to enable them to support the mental and emotional wellbeing of all young people more effectively.
- Involve young people and parents more fully in developments to improve services and resources for young people with mental health problems.
- Ensure that partners, including voluntary and community partners, are involved in curriculum planning and support.
- Improve support for young people with long-term mental health problems to ensure that they have a successful transfer from school to positive and sustained destinations.

## **Acknowledgments**

This publication draws on evidence from inspections of schools and colleges in the period from 2008-2010. It also takes into account information gathered during visits to a sample of establishments in the course of this task. HMIE would like to thank all young people, parents and staff who contributed to these activities. Thanks also to the many staff we interviewed from a variety of voluntary and other organisations.

## Appendix 1

### Suggested reading:

***A Guide to Getting It Right For Every Child.*** Scottish Government 2008

***Education (Additional Support for Learning) (Scotland) Act 2004***

***Education (Additional Support for Learning) (Scotland) Act 2009***

***Guide to Implementing Getting It Right For Every Child.*** Scottish Government 2010

***Principles for effective action: Promoting children and young people social and emotional wellbeing in education establishments.*** NHS Scotland 2011

***Scottish Needs Assessment Programme (SNAP) report on Child and Adolescent Mental Health.*** Public Health Institute of Scotland 2003

***The Mental Health of Children and Young People: A Framework for Promotion, Prevention and Care.*** Scottish Executive 2005

***Review of the Additional Support for Learning Act: Additional benefits for learners.*** HMIE 2010

### Helpful websites:

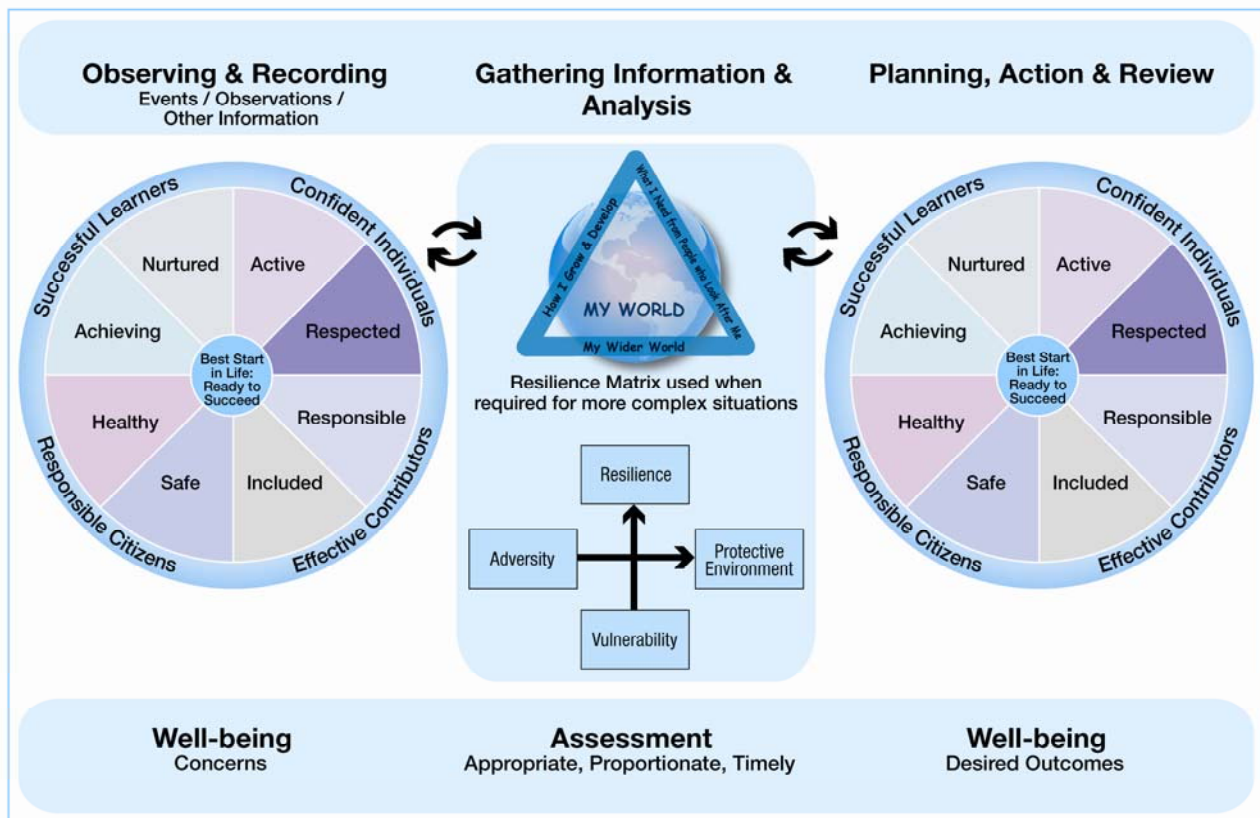
<http://www.handsonscotland.co.uk> This is a website developed with Scottish Government sponsorship which has two sections; 'Helping children to flourish' and 'How to help with troubling behaviours'.

<http://www.journeytoexcellence.org.uk>

<http://www.ltscotland.org.uk/supportinglearners>

## Appendix 2

### The National Practice Model





Further information about this publication is available from:

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**ISBN 978-0-7053-1553-1**

