Streatham & Clapham High School

Positive Mental Health Policy

September 2026

Person(s) responsible for this policy		**Assistant Head (Pastoral), School Nurse**	
Last review by	**Megan Furborough Carin Bearman Dior Lewis Alex Nicholson**	**Review**	**September 2026**
Date of next review		**September 2027 or sooner if required**	

Policy Statement

Mental health is a state of well-being in which every individual realises his or her 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 Organization)

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

In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. In an average classroom, three children will be suffering from a diagnosable mental health issue[1]. By developing and implementing practical, relevant and effective mental health policies and procedures we can promote a safe and stable environment for pupils affected both directly and indirectly by mental ill health.

Only appropriately trained professional should diagnose a mental health problem; however, it is the duty of all school staff to observe and identify warning signs, listen to and support pupils, record concerns and refer/ escalate appropriately.

Scope

This policy describes the school's approach to promoting positive mental health and wellbeing. It also outlines our procedures for responding to mental health issues. The policy is intended as guidance for all staff including support staff, volunteers and SGB members.

[1] NHS Digital (2018) 'Mental Health of Children and Young People in England, 2017'

This policy should be read in conjunction with the GDST Pupil Health Guidance in cases where a pupil's mental health overlaps with or is linked to a medical issue, and the school's SEND policy where a pupil has an identified special educational need.

Aims of Policy

- To promote positive mental health in all staff and pupils
- To increase understanding and awareness of common mental health issues
- To alert staff to early warning signs of mental ill health
- To provide support to staff
- To provide support to pupils and their parents or carers

Lead Members of Staff

Whilst all staff have a responsibility to promote the mental health of pupils, staff with a specific, relevant remit include:

Senior School:

- Ms Megan Furborough – Assistant Headteacher (Pastoral) and DSL
- Ms Olivia Rusholme – Director of Sixth Form
- Ms Carin Bearman – Senior School Nurse
- Mrs Amanda Macdonald – Senior School Counsellor
- Mr Ben Kirby – Head of Year 7
- Mr Mike Spooner – Head of Year 8
- Ms Rachel Grant – Head of Year 9
- Ms Emily McDonach – Head of Year 10
- Ms Dior Lewis – Head of Year 11 and Head of PSHCE
- Ms Hannah Evans-Young – Head of Year 12
- Ms Laura Tuggey – Head of Year 13

Prep School:

- Ms Alex Nichloson – Assistant Headteacher (Pastoral) and DSL
- Mrs Rachel Turner – Prep school counsellor
- Ms Alice Markes – PSHE lead
- Ms Rosa Calvo – Prep School Health Care Assistant

Promoting Positive Mental Health

A proactive approach to wellbeing is a thread running through all aspects of provision at Streatham & Clapham. Below is a list of some key aspects of ongoing wellbeing. These important aspects of life are reinforced through many initiatives, curriculum teaching, school culture and the overarching ethos of pastoral care in the school.

Everyone's path to happiness is different. Based on the latest research, 'Action for happiness' have identified the 10 key areas that tend to make life happier and more fulfilling, which together spell GREAT DREAM:



A key element of maintaining positive wellbeing is ensuring you get enough sleep. Sleep deprivation can play a significant role in poor mental health, particularly in anxiety and depression. Teenagers need to get between 8 and 10 hours per night of sleep. They rarely get close to this, and many operate on 5 – 6 hours as a norm. It is vital that we reinforce, regularly, the importance of sleep and encourage parents to ensure their daughters are exercising good 'sleep hygiene' before bedtime. At Streatham & Clapham we talk about looking after your SHED: Sleep, Hydration, Exercise and Diet.

We work hard to help pupils develop the understanding, resilience and resourcefulness to feel empowered to take care of their own mental health and to be helpful to those around them. Issues around mental health are covered in a range of ways within the school, including the PSHCE programme, form time activities, external speakers, assemblies and specific initiatives such as Mental Health Week or talks for parents. In many of these settings, external speakers with specific areas of expertise are invited to work with girls and parents, as are our own well-qualified counsellor.

The PSHCE curriculum is reviewed annually and modified according to need and feedback from pupils who express that they really value learning about mental health issues. Our School Council includes a Wellbeing Committee, with a representative from each form group.

As awareness grows around the impact of social media on self-esteem and mental health, we believe it's important to help our pupils reflect on their digital habits. Many young people spend significant time on platforms like Instagram and in group chats, and while these can be sources of connection, they can also contribute to feelings of inadequacy, anxiety, or isolation.

At the heart of our wellbeing approach is the belief that mental health should be spoken about openly, compassionately, and responsibly. We want to empower pupils to express themselves, while also understanding the importance of using language that is thoughtful and proportionate. Sometimes, in the intensity of teenage life, emotions can feel overwhelming, and it's easy to fall into patterns of exaggeration or to unintentionally romanticise mental health struggles. This can make it harder for those who are genuinely struggling to feel seen and supported.

That's why we encourage all pupils to learn how to talk about mental health in ways that are respectful, accurate, and helpful. It's equally important to understand the limits of peer support. While being there for a friend is incredibly valuable, pupils are not expected to carry the weight of someone else's serious mental health challenges alone. Knowing when to involve a trusted adult is not a betrayal—it's an act of care and courage, for both the person struggling and the friend supporting them.

Together, as a school community, we can create a culture where mental health is taken seriously, where support is accessible, and where every pupil feels safe to speak up and seek help when they need it.

Mobile phones and mental health

As a school we have a duty to create an environment that is calm, safe and free from distraction, disruption and diversion so that all pupils can learn and thrive. Schools should be a haven for pupils where the environment is focused on learning and development. Excessive exposure to social media sites has been shown to have negative effects on young people's wellbeing and phone use is inextricably linked to this. In addition, excessive use of mobile phones can inhibit opportunities to socialise face to face and generate stress for young people.

We are a mobile-phone free site, and all students in Years 7 to 11 must lock their phones in their designated phone locker for the duration of their time on the school site. Smart devices, such as smart watches or rings, are not permitted. Students in Key Stage Three are not allowed to bring a smartphone (a phone with internet capabilities) to school, but can instead bring in a 'brick' phone. Sixth Form students are permitted to keep their phones on their person, in the understanding that it is a privilege accompanied by the expectation of responsible use within a mobile phone-free school environment

In addition, we have limited the use of devices during break and lunch times for students in Years 7 to 9. This decision is aimed at encouraging pupils to socialise, build connections, and enjoy time outdoors.

We wish to strike a balance between the convenience of having a mobile phone and device, and patterns of use which may impede the academic progress of a pupil or reduce the opportunities they choose to take advantage of.

Responding to Mental Health Issues

Mental ill health is a part of life in just the same way as physical ill health; it is okay to talk about it, and it is okay to ask for help. All staff at the school have a role to play in pastoral care: pupils should feel that there are a range of staff they could talk to at any time if they have issues or concerns.

There are also several more formal sources of support in school that pupils can access:

Senior School:

- Tutors, Heads of Year, the School Nurse, Head of Sixth form and the Assistant Head (Pastoral) have formal responsibility for the pupils in their care and can provide advice and support.
- Counselling is available to pupils of all ages. Pupils in Year 7 and above can self-refer. Further details on the school's counselling arrangements can be found.
- Pupil run advice and buddying initiatives e.g. Streatham Sisters
- Anonymous reporting system – Whisper

Prep School:

- Form teachers, the School Nurse, identified Emotionally Available Adults for more vulnerable pupils and the Assistant Headteacher (Pastoral) can all provide advice and support.
- Counselling is available for all Prep pupils; this is triaged by the Assistant Headteacher (Pastoral).
- Anonymous reporting via Ms Nicholson; Listening Box; and class Worry Boxes.

Warning Signs

Staff should be alert to signs and indications that a pupil might be 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 their Head of Year or Megan Furborough at the Senior School, and Alex Nicholson at the Prep School, and record on CPOMS in the first instance.

Staff should consider whether a pupil's presentation may be associated with trauma, adversity or safeguarding experiences and respond in a way that is kind and understanding.

Peers are often aware of difficulties their friends may be experiencing at an earlier stage than staff. Pupils should be encouraged to talk to a teacher as soon as possible if they have concerns.

Whilst they may be worried about passing on information of this nature, they should be reassured that this will be the most effective way they can help their friend.

Possible warning signs include:

- Pupil is more withdrawn than usual, perhaps not sitting with friends, not participating
- Pupil appears sad or tearful regularly
- Pupil says, or looks like, she is not sleeping
- Pupil complains regularly of tummy ache / headache / general malaise
- Pupil is evidently tense / nervous – signs could include hair twisting, nail biting / picking, protective body posture, lack of eye contact, avoids chatting
- Pupil has lost / gained weight over a relatively short period of time
- Pupil's academic performance has dipped
- Pupil seems distracted or distant / finds it hard to concentrate
- Pupil is unusually irritable
- Physical signs of harm that are repeated or appear non-accidental
- Changes in sleeping habits
- Significant restriction of food and or rapid changes in eating or weight
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood
- Lowering of academic achievement
- 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
- Skipping PE or getting changed secretively
- Lateness to or absence from school
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

Further information and sources of support for common mental health conditions can be found in Appendix A.

Any member of staff who is concerned for any reason about the mental health or wellbeing of a pupil should speak to their Head of Year or Megan Furborough at the Senior School, and Alex Nicholson at the Prep School, in the first instance. If there is a fear that the pupil is in danger of immediate harm, then the normal child protection procedures should be followed with an immediate referral to the appropriate DSL.

All staff should be aware that mental health problems can be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. If the pupil presents a medical emergency, then the normal procedures for medical emergencies should be followed, including alerting the School Nurse and contacting the emergency services by dialling 999 if necessary. If urgent mental health support is needed but is not an emergency, staff can use NHS 111 online or call 111 and select the mental health option as well as alerting the DSL.

Managing disclosures

A pupil may choose to disclose concerns about themselves or a friend to any member of staff, so all staff need to know how to respond appropriately to a disclosure.

If a pupil chooses to disclose concerns about their own mental health or that of a friend to a member of staff, the member of staff's response should always be calm, supportive and non-judgemental.

Staff should listen rather than advise and our first thoughts should be of the pupil's emotional and physical safety rather than of exploring 'why?'.

All disclosures should be recorded on CPOMs. This record should:

- Include the date and time
- Specify where it happened and who was involved (use full names in the first instance so there is no confusion)
- Describe what happened, including the student's own words where possible. Sometimes a body map is needed to mark the location of injuries.
- Be factual – avoid making inferences or embellishing details about what happened
- Include the actions you took (even if this was just recording the concern)
- Be written up as quickly as possible

This information should be shared with the DSL who will and offer support and advice about next steps.

Where a referral to CAMHS is appropriate, this will be led and managed by the DSL: Megan Furborough (Senior School) or Alex Nicholson (Prep School).

Confidentiality

We should be honest with regard to the issue of confidentiality. If it is necessary for us to pass our concerns about a pupil on, then we should discuss with the pupil:

- Who we are going to talk to
- What we are going to tell them
- Why we need to tell them

Parents should normally be informed (although the decision to inform parents is a sensitive one to be discussed with the DSL in advance). Older pupils may choose to tell their parents themselves, and if this is the case, the pupil may be given 24 hours to share the information before the school contacts parents, but the decision would be made within the individual's assessment. As a school we will call the parent to follow up.

If a child gives us reason to believe that there may be underlying child protection issues, then our child protection policy is followed.

Individual Care Plans

It is helpful to draw up an individual care plan for pupils causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the pupil, the parents and relevant health professionals. This can include:

- Details of a pupil'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

Signposting

We will ensure that staff, pupils and parents are aware of sources of support outside school in the local community. What support is available in the local community, who it is aimed at and how to access it is outlined in Appendix C.

We will also display relevant sources of support in communal areas such as common rooms and toilets and will regularly highlight sources of support to pupils within relevant parts of the curriculum. Whenever we highlight sources of support, we will increase the chance of pupil help-seeking by ensuring pupils understand:

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

Mental-health concerns do not need to reach the threshold of a safeguarding crisis before support is offered. The school will consider Early/Family help alongside internal pastoral provision and specialist health services.

Supporting Peers

When a pupil 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 support.

Support will be provided either in one to one or group settings and will be guided by conversations with the pupil who is suffering and their parents with whom we will discuss:

- What it is helpful for friends to know and what they should not be told
- How friends can best support
- Things friends should avoid doing or saying which may inadvertently cause upset
- Warning signs that their friend may need help (e.g. signs of relapse)

Additionally, we will want to highlight with peers:

- That they can best support their friend by ensuring that an adult is aware of their difficulties
- Where and how they can access support for themselves
- Safe sources of further information about their friend's condition
- Healthy ways of coping with the difficult emotions they may be feeling

Referral to School Counsellor

Streatham & Clapham has within its staff two school counsellors – Rachel Turner (Prep School) and Amanda Macdonald (Senior School). Pupils can attend counselling in the following ways:

- **Self-referral** – Pupils can self-refer to the school counsellor in the Senior School. In the Prep-School, there are drop-in sessions available over lunchbreaks and a booking form which teachers can utilise.
- **Form tutor/class teacher referral** – In the Senior School, Form Tutors can make recommendations to the relevant Head of Year who will make a referral to the Inclusion Panel. The same process applies for class teachers in the Prep School.
- **Parent referral** – Parents are welcome to request that their child attend counselling. A request for counselling should be made to the Tutor or Head of Year at the Senior School, or to the Form Teacher or Assistant Headteacher (Pastoral) at the Prep School.

The content of the counselling sessions remains confidential between the school counsellor and the pupil unless the welfare or safety of the pupil is considered to be at risk of significant harm. The school counsellor may, with the pupil's agreement, provide parents or school staff with a general progress report.

All requests for the counselling service should be taken to the Inclusion Panel. The school should be aware that counselling is not always an appropriate response in an emergency situation and

that a referral to a General Practitioner (GP) or other Child Protection policy action may be required.

New referrals will be discussed with the counsellor each week, and the waiting list reviewed and the priority for each pupil re-assessed as necessary. If there is any new relevant information about a pupil who is engaged in counselling or on the waiting list, this should be shared with the counsellor in-person or by tagging them on CPOMS.

It is important to manage the schedule of counselling sessions for pupils and liaise with the counsellor to ensure that a pupil does not regularly miss the same lesson and that sessions are sensitive to the school's timetabling constraints.

The school counsellor will be available in the school at the agreed time each week and will be contactable for urgent referrals; this makes the school counsellor accessible to all members of the school community, helps develop relationships and reinforces the view that counselling is a normal part of a school's provision for its pupils and staff.

If a student is receiving therapeutic support outside of school, it will usually not be possible to offer them additional in-school counselling in order to ensure safe and appropriate practice. Typically, two therapeutic interventions do not run concurrently.

Partnership with Parents

Parents are often very welcoming of support and information from the school about supporting their children's emotional and mental health. In order to support parents, we:

- Highlight sources of information and support about common mental health issues on our school website
- Ensure that all parents are aware of who to talk to, and how to go about this, if they have concerns about their own child or a friend of their child
- Make our Mental Health Policy easily accessible to parents
- Share ideas about how parents can support positive mental health in their children through our regular information evenings
- Keep parents informed about the mental health topics their children are learning about in PSHCE and share ideas for extending and exploring this learning at home

Where issues arise with individual pupils and it is deemed appropriate to inform parents, we need to be sensitive in our approach. Before disclosing to parents, we should consider the following questions (on a case-by-case basis):

- Can the meeting happen face to face? This is preferable.

- Where should the meeting happen?
- Who should be present?
- What are the aims of the meeting?

It can be shocking and upsetting for parents to learn of their child's mental health issues, and many may respond with anger, fear or upset during the first conversation. We should accept this (within reason) and give the parent time to reflect.

We should always highlight further sources of information and give them leaflets to take away where possible as they will often find it hard to take much in whilst coming to terms with the news about their daughter. Sharing sources of further support aimed specifically at parents can also be helpful too, e.g. parent helplines and forums.

We should always provide clear means of contacting us with further questions and consider booking in a follow-up meeting or phone call right away as parents often have many questions as they process the information. Each meeting should finish with agreed next steps and always keep a brief record of the meeting on the child's confidential record.

Staff Mental Health

The mental health of our staff is as important to the school as is that of our pupils. Nationally over the past few years the level of work-related stress, burnout and work absence amongst teachers has increased. Teacher wellbeing has significant implications not only for the individual teacher, but also their colleagues, pupils and the school more broadly. Research indicates that teacher morale directly correlates with pupil achievement.

A number of school initiatives support the wellbeing of our staff:

- Staff as well as pupils should feel that there are individuals they can talk to if they feel they might be experiencing mental health or emotional wellbeing issues. If they do not feel able to approach their line manager they should speak to one of the SLT, or the school's HR Business Partner at Trust Office
- All staff and immediate family members who live with them have access to the GDST's Employee Assistance Programme – details of which can be found on the Knowledge Hub
- In the Senior School, there are three trained 'Mental Health' first aiders available to staff wellbeing – Miss Dior Lewis, Dr Sadaf Choudhary and Ms Joy Mithia.
- In the Prep School

Training

As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular child protection training to enable them to keep pupils safe. Where the need to do so becomes evident, we host additional training sessions for all staff to promote learning or understanding about specific issues related to mental health.

Training opportunities for staff who require more in-depth knowledge are provided through the GDST Learn programme. This typically includes role-based training for form tutors, Heads of Year, Pastoral Leads and DSLs, and topic/skills-based training such as social and emotional development at different ages, self-harm and counselling skills.

Links to other policies

This policy operates in conjunction with:

- Safeguarding and Child Protection Policy
- GDST Inclusion Policy
- GDST Equal Opportunities Policy
- SEND Policy
- Anti-Bullying Policy
- Eating disorders and self-harm

Monitoring, evaluation and review

The effectiveness of this policy and the school's positive mental health strategies will be continuously evaluated through monitoring of pastoral cases and referrals to the school councillor, and in collaboration with pupils via the pupil council.

This policy will be reviewed every two years as a minimum. It was last reviewed in September 2026 and is next due for review in September 2027.

Additionally, this policy will be reviewed and updated as appropriate on an ad hoc basis as the need arises. If you have a question or suggestion about improving this policy, this should be addressed to Megan Furborough (Senior School) and Alex Nicholson (Prep).



STREATHAM
& CLAPHAM
HIGH SCHOOL

Appendix A: Further information and sources of support about common mental health issues

Below, we have signposted information and guidance about the issues most commonly seen in school-aged children. The links will take you through to the most relevant page of the listed website. Some pages aimed primarily at parents are useful for school staff too.

Support on all these issues can be accessed via:

- Young Minds (www.youngminds.org.uk),
- Mind (www.mind.org.uk)
- Minded (www.minded.org.uk) for e-learning opportunities
- Anna Freud (https://www.annafreud.org/)
- Childline (https://www.childline.org.uk/)
- The Mix (https://www.themix.org.uk/) – aimed at under 25s
- Hub of Hope (https://hubofhope.co.uk/) – locates relevant local services on entering a location or postcode
- Kooth (https://www.kooth.com/) – online mental wellbeing community

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.

Online support

SelfHarm.co.uk: www.selfharm.co.uk
National Self-Harm Network: www.nshn.co.uk

Books

Pooky Knightsmith (2015) *Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies*. 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

Carol Fitzpatrick (2012) *A Short Introduction to Understanding and Supporting Children and Young People Who Self-Harm*. London: Jessica Kingsley Publishers

Depression

Ups and downs are a normal part of life for all of us, but for someone who is suffering from depression these ups and downs may be more extreme. Feelings of failure, hopelessness,

numbness or sadness may invade their day-to-day life over an extended period of weeks or months, and have a significant impact on their behaviour and ability and motivation to engage in day-to-day activities.

Online support
Charlie Waller Memorial Trust: https://www.charliewaller.org/

Books
Christopher Dowrick and Susan Martin (2015) *Can I Tell you about Depression?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers

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 thoughts of anxiety, fear or panic are repeatedly present over several weeks or months and/or they are beginning to impact on a young person's ability to access or enjoy day-to-day life, intervention is needed.

Online support
Anxiety UK: www.anxietyuk.org.uk
No Panic: www.nopanic.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

Obsessions and compulsions

Obsessions describe intrusive thoughts or feelings that enter our minds which are disturbing or upsetting; compulsions are the behaviours we carry 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. Obsessive compulsive disorder (OCD) can take many forms – it is not just about cleaning and checking.

Online support
OCD UK: www.ocduk.org/ocd

Books
Amita Jassi and Sarah Hull (2013) *Can I Tell you about OCD?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers

Susan Conners (2011) *The Tourette Syndrome & OCD Checklist: A practical reference for parents and teachers*. San Francisco: Jossey-Bass

Suicidal feelings

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 out of the blue.

Online support

Prevention of young suicide UK – PAPYRUS: www.papyrus-uk.org

Books

Keith Hawton and Karen Rodham (2006) *By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents*. London: Jessica Kingsley Publishers

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

Eating problems

Food, weight and shape may be used as a way of coping with, or communicating about, difficult thoughts, feelings and behaviours that a young person experiences day to day. Some young people develop eating disorders such as anorexia (where food intake is restricted), binge eating disorder and bulimia nervosa (a cycle of bingeing and purging). Other young people, particularly those of primary or preschool age, may develop problematic behaviours around food including refusing to eat in certain situations or with certain people. This can be a way of communicating messages the child does not have the words to convey.

Online support

Beat – the eating disorders charity: https://www.beateatingdisorders.org.uk/

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

Pooky Knightsmith (2012) *Eating Disorders Pocketbook*. Teachers' Pocketbooks

Appendix B: Guidance and advice documents

Mental health and behaviour in schools - departmental advice for school staff. Department for Education

Counselling in schools: a blueprint for the future - departmental advice for school staff and counsellors. Department for Education

PSHE Association Guidance: Teaching about mental health and emotional wellbeing Funded by the Department for Education

Teaching about mental wellbeing – materials for schools to train staff about teaching mental wellbeing. Department for Education

Keeping children safe in education - statutory guidance for schools and colleges. Department for Education

Supporting pupils at school with medical conditions - statutory guidance for governing bodies of maintained schools and proprietors of academies in England. Department for Education

Healthy child programme from 5 to 19 years old is a recommended framework of universal and progressive services for children and young people to promote optimal health and wellbeing. Department of Health

Future in mind – promoting, protecting and improving our children and young people's mental health and wellbeing - a report produced by the Children and Young People's Mental Health and Wellbeing Taskforce to examine how to improve mental health services for children and young people. Department of Health

NICE guidance on social and emotional wellbeing in primary education

NICE guidance on social and emotional wellbeing in secondary education

What works in promoting social and emotional wellbeing and responding to mental health problems in schools? Advice for schools and framework document written by Professor Katherine Weare. National Children's Bureau

The link between pupil health and wellbeing and attainment A briefing for head teachers, governors and staff in education settings Public Health England

Promoting children and young people's emotional health and wellbeing A whole school and college approach Public Health England