Developing a whole organisational approach

Introduction to the case study practice illustrations

This practice example is aimed at school staff and policy-makers wanting to understand how schools and colleges develop a whole organisational approach to support mental health and character education. It is part of a series of five practice examples focused on mental health provision in settings. The other four practice examples are:

- Developing a preventative approach;
- Identification and assessment of needs;
- Working in partnership; and
- Engaging parents and families.

They draw on learning from case studies which formed part of research on support for mental health and character education in schools, colleges and alternative provision across England [1,2,3,4]. The case study schools were selected based on their reported active engagement in provision for mental health and character development. The case study settings included mainstream (both LA maintained and academy) primary and secondary schools and further education colleges. Where there was transferable learning for mainstream settings, the practice examples also contain findings from special schools and Pupil Referral Units (PRUs).

This practice example provides a brief overview of how the case study settings created a whole organisational approach through staff roles and raising staff awareness and understanding. The facilitators and challenges encountered while developing a whole organisational approach are discussed, along with the benefits and resources needed to create the approach. Finally, some tops tips on how to develop a whole organisational approach, drawing on the experiences of staff at the case study schools and colleges are provided and a short resources section of suggested reading.

Overview

Just as safeguarding was seen as everybody's business, whole organisational approaches to supporting mental health reflected that head teachers saw this as part of their duty of care towards students. Similarly, as their primary purpose was to educate children, all staff had an interest in addressing barriers to learning – including those relating to social and emotional needs. With levels of need seen to be rising, the imperative to act was strengthened.

Case study settings aimed to embed a whole organisational culture which: promoted positive mental health; raised awareness of mental health issues and where to go for help; combatted stigma; supported emotional literacy; and equipped children and young people to look after their own mental health. Awareness-raising among, and engagement with, students and parents are covered more fully in other practice examples – *Developing a preventative approach* and *Engaging parents and*

families. This illustration focuses on developing a whole organisational culture by increasing staff awareness and engagement through assigned roles, support and training.

Staff roles

An effective whole organisational approach encouraged and equipped all staff to promote good mental health, but was built upon clear team structures and defined roles and responsibilities.

- **Head teachers or other strategic leads played a key part in driving the agenda, and building and sustaining staff commitment.** This required clarifying how attending to students' mental health aligned with the school's identity, values and mission, with the particular needs of their students, and with their teaching strategy. For example, in one primary PRU, the head organised extensive consultation with staff, governors and students to maximise buy-in across the school for a new strengths-based approach and focus on emotional literacy, seeking their views on the values they wanted to embed, and how to do it. The school council was also responsible for writing a new school motto, focusing on uniting and being the best they could be. After initial consultations, the head shared their approach with parents and partner agencies.
- **A whole organisational approach required senior leadership teams to review not only approaches to teaching, but also the school timetable.** This meant protecting time for relaxation, physical and extra-curricular activities - and opportunities for students to build relationships with staff outside the classroom – all activities highlighted in *Developing a preventative approach* as playing a role in prevention.
- **It was also important for heads/leads to demonstrate commitment to *staff* mental health**; ensuring they had (non-judgemental) support – and time - to address their own challenges, and any arising from working with students. This could involve a combination of supervision, team meetings, Inset days, consultation with specialist staff and – for personal issues - access to confidential advice lines. One primary school, for example, used peer coaching, whereby staff observed each other and then discussed their practice. The head also conducted annual stress risk assessments (which covered coping strategies) and met individually with all staff to discuss how they felt about their work, with these meetings kept separate from the performance management process.
- **Having pastoral or support teams made up of designated staff (e.g. safeguarding leads, tutors, student support managers or external counsellors) with defined roles in relation to mental health was seen as crucial**, as part of a continuum of support ranging from universal, preventative activity to targeted, specialist provision. All staff needed to be aware of whom to approach and when, to supplement any support they provided personally. Particularly in secondary schools and colleges, these meetings were important to ensure the early identification of need as they provided an opportunity for all staff to raise concerns (see practice example *Identification and Assessment of need*).
- **To ensure young people felt comfortable asking for help, teachers and support staff had to build positive relationships with them.** Staff needed to be good role models in terms of wellbeing and emotional literacy – displaying characteristics such as empathy and self-control. Beyond this, all staff needed some understanding of mental health issues, to identify and respond appropriately when students were struggling.

Raising staff awareness and understanding

Although head teachers aimed to recruit staff sympathetic to, and enthusiastic about, their approach, staff training was seen as key to boosting awareness, understanding, confidence and commitment. In one LA-maintained secondary school, for example, this involved:

- Heads of year being trained in Mental Health First Aid, which had improved their knowledge of different mental health problems, how to recognise warning signs, and what to do if concerned or approached for help, by students or parents.
- Having all staff attend a 'Teen Brain' course, focusing on how changes in the adolescent brain could affect emotions, sleep, attitudes to risk and understanding of facial expressions.
- Senior staff building up files with useful resources and sources of advice for staff to consult.

In a secondary academy, similarly, raising staff skills involved internal and external training. The programme was informed by the mental health lead's background reading and awareness of current needs in the school (e.g. around self-harm), and involved:

- Mental Health First Aid training for several key staff
- The lead attending the Mental Health First Aid Trainer course and NHS CYPMHS[a] courses (e.g. Supporting Adolescents with Anxieties and CBT), and cascading the learning more widely.
- Weekly meetings of the Student Development Team, to share experiences and organise briefings for staff, including from external practitioners such as educational psychologists.
- Training from a NHS CYPMHS practitioner for particular staff teams – for example, on developing leadership and teamwork in sport, and the value of exercise for a healthy mind; or dealing with anger issues in the classroom.
- Training for the wider staff team in appropriate language around mental health, and on how to address anxiety before exams, or key transition points.
- Incorporating mental health issues within behaviour management, safeguarding and preventative training – reinforcing the importance of mental health across the board.

Facilitators

Key facilitators in relation to whole organisational approaches included having senior management buy-in and a committed strategic lead. In some cases, new head teachers – or the appointment of staff with specific responsibilities for mental health – had helped to stimulate change. Additional resources and specialist input, for example through engaging with Mental Health Services and Schools Link pilots, also facilitated access to training and support for staff, and thereby increased engagement.

Benefits

The main benefit schools recognised of developing a whole organisational approach was the potential it offered for all students and staff to have increased understanding and awareness of mental health, which could result in improved wellbeing. Adopting a whole organisational approach,

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[a] Mental health provision for children and young people in England is provided under the umbrella of Children and Young People's Mental Health Services (CYPMHS). The CYPMHS framework incorporates all professionals working with children and young people, from universal provision through to specialist inpatient and outpatient services. The services that are funded by the NHS are known as NHS CYPMHS. These are services that were previously (and still are in many areas of the country) called NHS CAMHS.

it was suggested, helped to normalise talking about mental health, and reduce any stigma towards mental ill health.

Challenges

A key challenge for schools was investing in lower level interventions, support and training, in the context of budget constraints and gaps in provision for students with acute needs. There were other challenges associated with engaging *all* staff in promoting good mental health, including:

- **Finding time for staff to engage.** Teaching commitments could limit the scope for staff engagement in discussion about approaches; in training, sharing learning or exploring resources; and in the extent to which they could go 'above and beyond' in devoting time to students outside lessons, without it threatening their own work life balance and wellbeing. Having a mental health champion in a senior leadership role, who understood the importance of supporting mental health, was important as they could prioritise staff time for training in mental health over other activities.
- **Persuading some (teaching) staff to spend time engaging with students on a more personal level, or allow them to miss lessons to access support**. Staff training about mental health and an inclusive approach from leads could help overcome this challenge.
- **Focus on academic achievement**. There was a perception, particularly in mainstream secondary schools, that, despite wellbeing being added to the Ofsted performance and assessment framework, inspection remained focused on academic achievement; with insufficient emphasis on mental health. This was seen as unhelpful, as it reinforced the prioritisation of academic over other concerns.

Resourcing

As highlighted in another practice example – *Developing a preventative approach* - there were concerns about the continuing affordability of provision – particularly training - funded through pilot schemes such as the Mental Health Services and Schools Link pilots.

Training key staff not only to support students, but to train their colleagues on an ongoing basis, was seen as one solution. Otherwise, schools attempted to make good use of free or low cost training materials, such as the materials available on the MindEd website (https://www.minded.org.uk/).

Key learning

Key learning, including recommendations from case study sites for other schools included:

- Allow time, both day-to-day and over a period of time, to develop – and review - the approach, and to engage staff, students, parents and mental health professionals.
- Have a pastoral or support team structure with defined roles and responsibilities. If possible, separate designated support from behaviour management roles to protect time for the former and avoid students being deterred from seeking help.
- Effective training goes beyond increasing awareness to providing guidance on recognising issues and taking action. Information needs to be accessible, up to date and tailored to roles.
- Delivering a consistent approach requires protecting time for staff to engage in whole organisational training and reflection on practice, and making it clear, including through performance appraisals, that promoting good mental health as well as academic success is

valued. Staff also need to be well-rested and supported to be approachable and available to students.

References

1. Marshall, L; Rooney, K; Dunatchik, A and Smith, N. (2017) *Survey of Character Education in Schools in England.* London: DfE
2. Marshall, L; Wishart, R; Dunatchik, A and Smith, N. (2017) *Supporting Mental Health in Schools and Colleges – Quantitative survey.* London: DfE
3. White, C, Gibb, J, Lea, J and Street, C. (2017) *Developing Character Skills in Schools. Qualitative case studies.* London: DfE
4. White, C, Lea, J, Gibb, J and Street, C. (2017) *Supporting Mental Health in Schools and Colleges – Qualitative case studies.* London: DfE

Resources and further reading

MindEd: www.minded.org.uk – is a free resource on children and young people's mental health written for all professionals working with children and young people. The online portal provides over 200 e-learning modules including a session 'Communicating with Families' which provides an overview of the basic principles for engaging families, information about listening skills and ideas for questions that can aid effective communication with families.

Cowie, H; Boardman, C; Dawkins, J and Jennifer, D. (2004) *Emotional Health and Wellbeing. A Practical Guide for Schools*. London: Paul Chapman Publishing and Sage. This guide looks at both the risk factors and the protective factors involved in emotional health, and addresses the impact of issues such as bullying, social exclusion, and loss and bereavement.

Weare, K. (2004) *Developing the Emotionally Literate School*. London: Sage. The book provides practical information about how schools can become more emotionally literate, demonstrate the educational benefits and realise their goals of improvement and effectiveness.