Cumbria County Council



Targeted Mental Health in Schools Programme in

Cumbria: 2010 - 2011

TaMHS Toolkit



TaMHS Toolkit

This Toolkit is a legacy of the Targeted Mental Health in Schools project in Cumbria, 2010 – 2011. The TaMHS Toolkit contains information and resources which aim to help schools to support the positive mental health and emotional wellbeing of students and staff.

The Targeted Mental Health in Schools Programme (TaMHS) was a three year, national pathfinder programme, funded through the Department of Children, Schools and Families (DCSF), 2008 - 2011. Cumbria was one of 72 phase 3 Local Authorities who received funding for one year.

TaMHS was initiated to support the development of innovative models of therapeutic and holistic mental health support in schools for children and young people aged five to thirteen at risk of, and / or experiencing, mental health problems, and their families.

The TaMHS project in Cumbria ran between April 2010 and March 2011, project work was delivered by a team of nine professionals seconded from Cumbria County Council, Children's Services and Cumbria Partnership NHS Foundation Trust who provided intensive training and support to a total of eighteen schools across Cumbria. Further support mechanisms and services were commissioned from other organisations during the course of the project.

The TaMHS Toolkit is accompanied by final report from the Project Manager which describes the project work in detail and an independent evaluation of the TaMHS project in Cumbria commissioned from the University of Cumbria. Training for school based staff in using this Toolkit will be available from the Cumbria County Council, Children's Health and Wellbeing Team in the summer term 2012.

The Targeted Mental Health in Schools Programme in Cumbria: 2010 – 2011, Final Report makes a number of suggestions for all schools in Cumbria. The Toolkit will enable schools to begin to put the following suggestions into practice:

- Health professionals who work with children identified as experiencing high risk factors for poor mental health during infancy and the pre school years, should ensure that relevant information is passed onto Early Years and Primary School settings
- Schools should identify a lead practitioner for mental health and emotional wellbeing in their setting
- Schools should actively seek to prioritise whole staff training in child and adolescent mental health. E learning is available from: learning. camhs.org.uk/
- Schools should consider offering small group SEAL and Family SEAL for students and families as part of their ongoing provision
- Schools should actively promote the use of the TaMHS Cumbria Mental Health Toolkit
- All schools should have in place a policy for mental health and emotional wellbeing (a draft policy is included in the TaMHS Toolkit)
- Schools should regularly use whole school screening tools for student (and staff) wellbeing
- Schools should ensure that they are aware of students experiencing difficulties that are likely to impact on their mental health e.g. separation, divorce, bereavement and to offer information and support for these students and their families
- School staff should know where to seek advice regarding specific questionnaires and measures for children and young people who are experiencing difficulties with their mental health and emotional wellbeing. Educational Psychologists have access to a variety of measures of children's mental health and psychological wellbeing
- Schools working in clusters to share approaches, human resources and to 'buy in' external expertise e.g. mental health nurse, trained counsellor

There will be training available to support the use of the TaMHS Toolkit (see Local Learning Network programme summer term 2012) and a CD ROM containing resources and Power Point presentations for students.

Joanne Gaffney

TaMHS Project Manager - Cumbria County Council

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Introduction: Child and Adolescent Mental Health

The World Health Organisation (WHO 2004) defines mental health as a state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community. In these terms, mental health for children is fundamental to the achievement of other positive outcomes in life.

A range of terminology is used to talk about mental health. Some prefer to avoid to term 'mental health' and use terms such as emotional health or wellbeing. Mental health is not the same as being unhappy, unhappiness can be seen as a natural and normal reaction to many kinds of experience. Mental Health problems are evident when individuals are not able to cope emotionally with the experiences they have or when their reactions to their experiences themselves become a problem. This can include withdrawn behaviour as well as challenging behaviour.

Like physical health, mental health is influenced by various interacting social, psychological and biological factors. Risk factors include poverty, poor educational outcomes, lack of nurture and the experience of conflict and violence. However such factors do not always result in negative outcomes. Resilience factors can help a person to overcome the damaging effects of adversity. Protective factors for young people can include having at least one reliable relationship with another person, receiving good support from a teacher, doing well at school and receiving 'good enough' nurture from extended family.

Bringing about improvements in children's mental health needs to involve tackling risk and promoting resilience. For some children, some risks e.g. poverty, bereavement, may be almost impossible to avoid or undo but it may be relatively easy to find opportunities to offer positive, protective experiences such as providing access to a mentor.

The UK Government is a signatory to the UN Convention on the Rights of the Child. This means that children's mental health issues cannot be ignored but must be addressed and managed effectively. In accordance with the Convention, children have the right to say what they think should happen and to have their opinions taken into account.

An Office of National Statistics survey (Green et al. 2005) revealed that in 2004, 10 percent of children aged between 5 and 15 had a clinically diagnosable mental disorder that was associated with 'considerable distress and substantial interference with personal functions'. Problems were found to be more common among boys and eleven to fifteen year olds. This study also found that children who face three or more stressful life events such as divorce, family bereavement or serious illness are three times more likely than other children to develop emotional and behavioural disorders. Almost half of children originally assessed with behavioural disorders still had them three years later.

Some groups of children are at particular risk. For example, nearly 50 per cent of children in public care have a mental health disorder. Over a third of children with identifiable learning difficulties have diagnosable mental health problems, other children at risk include those with physical disabilities and chronic illness (DH 2008). Studies show that children don't just grow out of mental health problems. Half of those with lifetime mental health problems first experience symptoms by the age of 14 (DH 2011)

The great majority of children spend a significant amount of time in schools and all schools include children and young people with diagnosable mental health problems and with mental health issues. In more deprived areas the proportions are likely to be higher. Apart from parents those in the best position to identify children with mental health conditions are teachers (Layard and Dunn 2009). Children with mental health problems are more likely to underachieve and to have behavioural difficulties which impact on both their own performance and that of their classmates. Clear association between behaviour, mental health and school effectiveness is made by Sir Alan Steer (Steer 2009).

Many schools have a good understanding of the relationship between the mental health of young people and their ability to learn and develop socially. Ofsted (2005) reported on the promotion of emotional health and wellbeing in schools and noted that the best schools promoted good emotional health and wellbeing by valuing and respecting every individual. Ofsted found that few schools were using national guidance (DfEE 2001) to plan and provide support for pupil's emotional wellbeing and training for staff was found to be unsatisfactory in over a third of schools visited. Most training focused on using strategies to manage pupil's behaviour rather than on promoting a positive approach to relationships and conflict resolution. The Child and Adolescent Mental health Services (CAMHS) review (DH 2008) also noted significant variations in the approach and attitudes of schools to children's mental health.

The national picture has changed over the last decade with initiatives such as The Change for Children programme, The Children's Act (2004), Extended Schools, The Behaviour and Attendance Programme, the Social and Emotional Aspects of Learning and the National Healthy Schools Programme. Targeted Mental Health in Schools built upon this work by strategic, multi agency planning and evidenced based, localised operational delivery. The present Coalition Government have highlighted the importance of mental health in a new mental health outcomes strategy *No Health Without Mental Health* which recognises the role of schools in supporting the positive mental health of students.

This information is taken from the Introduction to Measures of Children's mental health and psychological wellbeing (Frederickson and Dunsmuir 2009)



Section 1 - Information

1.1. Useful Information around Mental Health and Emotional Wellbeing

All schools in Cumbria and all Children and Family Centres in county were sent a pack of factsheets titled 'Mental Health and Growing Up' from the Royal College of Psychiatrists in the summer term 2011. These packs were purchased for schools through TaMHS.

The following information is taken from The National Strategies, Inclusion Development Programme Primary and Secondary: Supporting pupils with Behavioural, Emotional and Social Difficulties (2010). Each school in Cumbria should have this CD Rom.

There are over 50 documents available in the **library** section of the resource that offers information around the inclusion of students with behavioural, social and emotional difficulties. The following documents are included in **Appendix 1**.

- 1.3 Definition of Attachment
- 1.4. National CAMHS review diagram showing risk and resilience factors
- 1.7 Helping children with anxiety and depression
- 2.2 Key characteristics that promote pupils' mental health
- 2.9 Developing a positive mindset
- 2.11 The importance of the physical environment
- 3.1 Active listening
- 3.3 Anger Management Resources
- 3.7 What is a nurture group?
- 3.8 Checklist of arrangements for out of class
- 3.9 Peer mentoring
- 4.3 The Common Assessment Framework
- 5.1 Self evaluation resource for the learner

1.2. List of Publications, References and Websites

The following publications contain useful information and guidance:

DCSF (2007). The Children's Plan: Building brighter futures. Nottingham: DCSF Publications

DCSF (2010) Me and My School. Preliminary findings from the first year of the National Evaluation of Targeted Mental Health in Schools (2008-2009) DCSF Publications

DCSF (2008b). Targeted Mental Health in Schools. Using the Evidence to Inform Your Approach: A practical guide for head teachers and commissioners. Nottingham: DCSF Publications.

DfEE (2001). Promoting Children's Mental Health Within Early Years and Schools Settings. Nottingham: DFEE Publications.

DH (2008). Children and Young People in Mind: The final report of the national CAMHS review. London: DH.

Green, H., McGinnity, A., Meltzer, H., Ford, T. and Goodman, R. (2005). Mental Health of Children and Young People in Great Britain, 2004. Norwich: HMSO.

HM Government (2008) PSA Delivery Agreement 12: Improving the health and wellbeing of children and young people

HM Government (2011). No health without mental health. A cross-government mental health outcomes strategy for people of all ages

Humphrey, N. et al. (2009). Systematic Review of Social and Emotional Skills Measures for Use with Children and Young People. DCSF Research Report. Nottingham: DCSF publications.

Layard, R. and Dunn, J. (2009). A Good Childhood: Searching for Values in a Competitive Age: The Landmark Report for The Children's Society. London: Penguin.

National Institute for Clinical Excellence (2008). Promoting Children's Social and Emotional Wellbeing in Primary Education. London: NICE.

National Institute for Clinical Excellence (2009). Promoting Young People's Social and Emotional Wellbeing in Secondary Education. London: NICE.

Ofsted (2005) Healthy Minds: Promoting emotional health and well-being in schools. London: London: Ofsted.

Steer, A. (2009). Learning Behaviour: The Report of the Practitioners' Group on School Behaviour and Discipline. Nottingham: DCSF Publications.

World Health Organisation (2004). Promoting Mental Health: Concepts, emerging evidence, practice. Geneva: WHO.

Wolpert, M. et al. (2009). Review and Recommendations for National Policy for England for the Use of mental Health Outcome Measures with Children and Young People. DCSF Research Report. Nottingham: DCSF Publications

The following websites provide useful information and guidance:

www.camsden.co.uk/home useful for younger children

www.centreformentalhealth.org.uk/ Sainsbury's centre for mental health

www.learning.camhs.org
Everybody's Business – e learning resource

www.chimat.org,uk
child and maternal health

www.childline.org.uk

www.childrenssociety.org.uk/wellbeing

www.cumbrialscb.com/
Cumbria Local Safeguarding Children Board

www.cumbriapartnership.nhs.uk/amaze NHS service that helps people aged 14-35 experiencing early symptoms of psychosis in Cumbria

www.cumbriapartnership.nhs.uk/child-and -adolescent-mental-health-services

www.cumbriapartnership.nhs.uk/contact-rollercoaster

award winning website containing information for young people

www.dart@connexionscumbria.co.uk

www.gasp.org.uk advice on smoking

www.kidscreen.org

measures of children's mental health and psychological wellbeing

www.incentiveplus.co.uk

resources for promoting social and emotional skills and mental health and wellbeing

www.nhs.uk/livewell/sexandyoungpeople/ advice for young people on relationships, sex and contraception

www.nurturegroups.org

www.positivepsychology.org.uk/

www.rcpsych.ac.uk/ Royal College of Psychiatrists

www.relaxkids.com

www.sebda.org/

social and emotional difficulties association

www.sis-cumbria.co.uk

self injury support

www.stem4-ed.org.uk

helps adults to recognise eating disorders self harm and addiction

www.unicef.org

www.winstoneswish.org.uk

bereavement

www.writing-wrongs.org

restorative justice

www.youngcarers.net

www.youngminds.org.uk

1.3. Staff Wellbeing

Introduction

The idea for this pack came from a project myself and my colleagues ran in a local school to raise the profile of and promote staff well being. The project was called 'Chill and Chat' was run in school in 2009 and 2010 over a number of weeks (5 weeks one year and 8 weeks the next year). Any member of staff was free to participate in the lunchtime sessions which ran over 2 hours. Lunch time had been selected as a time when most staff were in school and it would not impinge on after school responsibilities. To read more about what was available please read the section on Chill and Chat later in the pack.

By writing this pack it is not intended to presume that all members of school staff are experiencing poor well being or are always stressed. However, for those who are experiencing prolonged stress, feeling more overloaded than usual or are just trying to improve their general well being you may find the information contained here useful.

Louise Sharrocks

Cumbria County Council Educational Psychologist

Why Should I be Interested in Well Being?

'There is ample evidence that teachers, in the course of their careers, experience a great deal of stress that may result in depressed mood, exhaustion, poor performance or attitude and personality changes, which, in turn, may lead to illness and premature retirement.'
(Schwarzer and Hallum, 2008 p.155).

Teacher Support Network

survey 2009 82% respondents **Dunlop and Macdonald** (2004) - 78% of their stated they had had stress teacher respondents noted related ailments over the last 2 years and of those 60% felt it psychological stress affected their well being 'often' or was work related. 'sometimes'. DfES (2007) - Teachers are required to be constantly **School Staff** vigilant, manage staff, meet parental expectation, cope with change and manage pressures. Resilient teachers have been found to have higher levels of well being. Teachers reporting high levels of job strain were found to have higher blood pressure and heart rates in the evenings (Griffith et al 1999).

What Contributes to Mental Well Being?

- Research has indicated that having good social skills is linked to having higher self esteem and satisfaction with social interactions (1). People in possession of good social skills potentially have greater access to social support and hence may experience lower stress levels and higher levels of well being. This research further investigated what aspects of 'social skills' might contribute towards perceiving less stress and it was proposed that the propensity to turn to others for help and a belief in one's self effectiveness were highly important.
- Attributional Style. People who score more highly on scales of extraversion and conscientiousness and lower on neuroticism tended to have higher levels of self acceptance, mastery and life purpose (2).
- Mindfulness There is a growing literature base regarding mindfulness. This discipline involves being able to observe thoughts and sensations with non-judgmental acceptance. The aim has been proposed to be about allowing oneself to be where one is and experience the moment rather than aiming for an outcome (3) i.e. it is the application of the process which is proposed to contribute to increased feelings of well being not using the process in order to feel more relaxed or positive.
- Mindfulness training has been reported to have impacts on teachers' ability to feel more relaxed and focused (4) and also production of antibodies and increased affect in biotechnology workers (5).
- Warr (6, 7) identified a range of factors
 which contribute to workplace well being
 including: opportunities for control, variety
 in the job, opportunities to interact with and
 form relationships with colleagues, supportive
 supervision, pay, holding a valued social position
 and job security.
- The ability to 'switch off' from work has been identified as a contributor to well being (8).
 Simply being away from the workplace does not imply leaving a job behind! It was found that the ability to detach was more important and beneficial than simply spending longer away from the workplace.

 The use of relaxation or distraction when stressed is linked to more positive mood (9).

What is Stress?

'Stress is a pattern of physiological, behavioural and cognitive responses to real or imagined stimuli which are perceived as dangerous or threatening to well being or abilities' (Buskist and Gerbing 1990 p.648).

The Biology of Stress

As soon as a stressor is perceived the sympathetic nervous system swings into action:

- Heart rate increases, blood pressure rises, blood sugar rises, blood is directed away from the extremities and towards the major organs.
- Breathing becomes deeper and faster, digestion stops and perspiration increases.
- · Adrenalin is secreted.

This reaction is very effective for a 'fight flight' response in order to prepare the body to deal with the immediate source of danger / stress. The biological response is the same whether the stressor is a mugger in a dark alley or a huge pile of marking.

With continued high levels of stress initially we adapt, but this high level of arousal cannot be maintained indefinitely and the person will become exhausted and susceptible to illness.

The psychological components of stress
Once a stressors is perceived it is cognitively appraised i.e. is the threat real? Is the person looking at a picture of a pile of marking or is the marking really sitting there waiting?
The decision is then made – Do I have the resources to cope?

Signs and Symptoms Associated with Stress

These signs and symptoms are not intended to be diagnostic, but can be used as a checklist to see if you are experiencing some of the common indicators of stress.

Cognitive Symptoms

- Memory problems
- Inability to concentrate
- Poor judgment
- Seeing only the negative
- Anxious or racing thoughts
- Constant worrying

Emotional Symptoms

- Moodiness
- Irritability or short temper
- Agitation, inability to relax
- Feeling overwhelmed
- Sense of loneliness and isolation
- Depression or general unhappiness

Physical Symptoms

- Aches and pains
- Diarrhea or constipation
- Nausea, dizziness
- · Chest pain, rapid heartbeat
- Loss of sex drive
- Frequent colds

Behavioral Symptoms

- Eating more or less
- Sleeping too much or too little
- Isolating yourself from others
- Procrastinating or neglecting responsibilities
- Using alcohol, cigarettes, or drugs to relax
- Nervous habits (e.g. nail biting, pacing)

What Behaviours May Cause Job Stress?

Sometimes people's views, thoughts and behaviours contribute to their feelings of stress. Below are a range of possible mindsets and some questions which may help you consider if you are perhaps adding to the stress you are feeling.

Need for control

- Do you feel the need to be in control at all times?
- Do you see not being totally in control as a sign of weakness?
- Do you have difficulty delegating work to others?
- Are you wary of showing signs of 'weakness' or nervousness?

Negative feelings of competence

- Do you feel your teaching / work is inferior to that of others?
- Do you feel you make poor judgments?
- · Do you feel you lack common sense?
- Have you got doubts about your competence and ability to do your job?

Desire to please others

- Do you tend to rely on opinions and input from others to build your self esteem?
- Are you worried you may disappoint others?
- Do you tend to care more about others' needs than your own?
- Do you try and avoid saying and doing things which would displease others?

Need to be perfect

- Do you feel under pressure to achieve?
- Are you highly self critical?
- Do you tend to always feel a job could have been done even better?
- Do you sacrifice your time and pleasure to excel and achieve?

Breaking Bad Habits

Below are some 'bad habits' and unhelpful ways of thinking. These thought patterns can be incorporated into the way we think about successes and more tricky times and can contribute to feelings of helplessness, loss of control, unhappiness, poor self esteem and feelings of incompetence.

All or nothing thinking – 'I found today hard, therefore I am a bad teacher.' This 'black and white' thinking allows for no 'grey areas' or exceptions.

Overgeneralisation – 'That child shouted at me today – everybody hates me.' This thinking involves generalizing from one incident with no further evidence.

Mental filtering – This involves filtering out all the positives and noticing the one thing which went wrong. For example, planning a great lesson, having good resources, explaining it well, the children enjoying the lesson, but you forgot to tell the class 1 of the facts you had planned to.

Diminishing the positives – This means attributing your success to external factors (chance, luck, someone else helping), rather than your ability, effort, commitment. 'My class did well on the SATS because they are clever and the questions were easy.'

Jumping to conclusions – Self explanatory really; 'I know this is going to go badly', 'They are all going to hate the school trip.'

Catastrophising – Attributing huge and life changing import to what is probably in reality a small incident. 'I blamed him for something he didn't do and although I've apologized I've ruined his life.'

Emotional reasoning – Gauging reality through how you are feeling. 'I feel very worried and so there really is very serious cause for worry.'

Labelling – Labelling yourself using sweeping negative terms – 'I'm stupid', 'I'm rubbish'.

Personalisation – taking responsibility for anything and everything which does not go well. 'It's my fault that they had a fight, I should have known that they had argued on the way home.'

Top Tips for Managing Stress

- Get some time away go for a walk, go somewhere else briefly, listen to music even if just for 5-10 minutes in the day.
- Organise your desk so that you can see what needs to be done. Make a 'to do' list and tick things off as you do them.
- Think in steps break a large task up into steps and do it one bit at a time.
- Take breaks (even if only for a few minutes), eat away from your work area (including any area you consider 'work').
- Get enough sleep.
- Drink plenty of water during the day have a water bottle like the children.
- Find humour in the situation. Have a laugh with friends, watch a funny film.
- Talk to someone who will listen friend, colleague, manager.
- You may strive for perfection getting it 'almost perfect' is ok.
- Try to maintain a positive attitude.
- Put a treat in your diary every few weeks to look forward to.
- · Eat a well balanced diet and exercise properly.
- Don't think vaguely about having a weekend away – plan one and stick to it!
- On the journey home do something to help you make the transition (get your mind off work)
 listen to the radio, call on a friend, go to the shop.
- · Maintain realistic expectations of yourself.
- Get a hobby.
- Practice relaxation techniques.

Worrying and Anxiety

We are all worried and anxious at times and this is normal as we strive to cope with the demands of life and work. However, for times when you feel that you are constantly worrying or if you feel you are a habitual worrier the following self help ideas may be of use.

Accept uncertainty – Worrying about what may happen will not stop things happening, but will stop you enjoying the present.

Create a worry time – Set aside a time when you are 'free to worry' at the same time each day. The aim is to make the rest of the day worry free. Postpone the worry – when you feel yourself begin to worry about something make a note so that you can think about it later rather than now. During the 'worry time' go over the worry list you have created. If the worry still concerns you then allow yourself to think about it for the set time. If you are no longer as concerned by the idea cut short your worry time and continue with your day.

This strategy is felt to be effective as it breaks the habit of worrying at the present moment and provides the worrier with a sense of control if the worrying can be delayed.

Challenge the negative thought – People who worry a great deal are often prone to overestimating the chance that things will turn out badly and underestimating their ability to cope. This can become an automatic way of thinking. Consider 'retraining your brain'.

Question the thought:

- What evidence is there that the thought is true / not true?
- Is there a more positive or realistic way to look at the situation?
- What is the probability that this will actually happen?
- If the probability is low then what is a more likely outcome?
- Is the thought helpful? Will worrying about it help or cause more anxiety?
- What would I say to a friend with this worry?

Getting Started – Relaxation

Try to incorporate time to relax into your daily routine – set time aside specifically.

Don't practice relaxing when you are tired. It is best to relax when you are fully awake and alert to gain the benefits.

Decide if you want to relax alone (meditation, muscle relaxing, listening to relaxation CDs) or with others (in a taught class, with a group of friends).

Possible relation techniques

1) Mindfulness meditation

This is the quality of being fully engaged in the present moment; not dwelling on the past or worrying about the future. For stress relief, try the following mindfulness meditation techniques:

- Body scan Body scanning cultivates mindfulness by focusing your attention on various parts of your body. Like progressive muscle relaxation, you start with your feet and work your way up. However, instead of tensing and relaxing your muscles, you simply focus on the way each part of your body feels without labelling the sensations as either "good" or "bad".
- Walking meditation You don't have to be seated or still to meditate. In walking meditation, mindfulness involves being focused on the physicality of each step — the sensation of your feet touching the ground, the rhythm of your breath while moving, and feeling the wind against your face.
- Mindful eating If you reach for food when you're under stress or gulp your meals down in a rush, try eating mindfully. Sit down at the table and focus your full attention on the meal (no TV, newspapers, or eating on the run). Eat slowly, taking the time to fully enjoy and concentrate on each bite.

2) Guided imagery

Whilst sitting or lying in a relaxed and comfortable position in a quiet place picture a scene which is restful and relaxing for you. Consider:

- What can you see? (E.g. tall cliffs, birds wheeling in the sky, white peaked waves)
- What can you hear? (E.g. the surf crashing, the flap of a sail)
- What can you smell? (E.g. salt from the sea, charcoal from the barbeque)
- What can you feel? (E.g. the warm sun, the fluffy towel you are lying on)
- What can you taste? (E.g. salt on the breeze)

3) Breathing and progressive muscle relaxation

When we are worried changes in breathing and tensed muscles bring on unpleasant sensations and increase anxiety levels. Using breathing and relaxation techniques can decrease the sensations and promote feelings of calmness and relaxation.

Breathing

If you are breathing too quickly and too deeply you take in more oxygen than the body needs which can lead to worrying sensations. Generally breathing rate is about 12-14 breaths per minute when calm and relaxed.

It is also important to clarify in you are a chest breather or a stomach breather.

Chest breathing is shallow and rapid. Anxious people often experience breath holding, hyperventilation or shortness of breath whilst chest breathing.

Stomach (abdominal / diaphragmatic) breathing is used more by people who are less anxious or managing their anxieties. Breathing tends to be even and the body is better able to produce energy from the oxygen and remove carbon dioxide.

You may wish to consult your doctor before doing any breathing exercises if you have a physical condition which is related to breathing problems.

- Relax your upper chest and shoulders.
- Relax your jaw and breathe in slowly through your nose.
- Breathe in so that your stomach rises. Check that you are using your stomach / diaphragm by placing one hand on your chest and the other on your stomach.
- Breathe out through your mouth and let the air 'fall out' effortlessly.
- Aim to breathe in for 4 seconds, hold for 2 and breathe out for 6. If you find this hard try 3, 1, and 4 first.
- Counting also helps you to focus and not think about anxiety provoking ideas.
- This does take practice. Lots of people find that they experience unusual sensations when they first try this exercise, but it is learning a new skill and takes time to learn and become used to.
 Do not worry if it is initially difficult – if you have been breathing differently for years this new technique will take some time to get used to.

Progressive muscle relaxation

Initially begin with the breathing exercises. When you are ready focus on the muscle groups as described below. Focus on the tension for 5 seconds and then relax for 10 seconds and notice the sensation of the relaxed muscle. You may wish to use the following as a script and record it for future use perhaps with some music.

Start with the large muscles of your legs. Tighten all the muscles of your legs. Tense the muscles further. Hold onto this tension. Feel how tight and tensed the muscles in your legs are right now. Squeeze the muscles harder, tighter... Continue to hold this tension. Feel the muscles wanting to give up this tension. Hold it for a few moments more.... and now relax. Let all the tension go. Feel the muscles in your legs going limp, loose, and relaxed. Notice how relaxed the muscles feel now. Feel the difference between tension and relaxation. Enjoy the pleasant feeling of relaxation in your legs.

Now focus on the muscles in your arms. Tighten your shoulders, upper arms, lower arms, and hands. Squeeze your hands into tight fists. Tense the muscles in your arms and hands as tightly as you can. Squeeze harder.... harder..... hold the tension in your arms, shoulders, and hands.

Feel the tension in these muscles. Hold it for a few moments more.... and now release. Let the muscles of your shoulders, arms, and hands relax and go limp. Feel the relaxation as your shoulders lower into a comfortable position and your hands relax at your sides. Allow the muscles in your arms to relax completely.

Focus again on your breathing. Slow, even, regular breaths. Breathe in relaxation.... and breathe out tension..... in relaxation....and out tension.... Continue to breathe slowly and rhythmically.

Now focus on the muscles of your buttocks. Tighten these muscles as much as you can. Hold this tension..... and then release. Relax your muscles. Tighten the muscles of your back now. Feel your back tightening, pulling your shoulders back and tensing the muscles along your spine. Arch your back slightly as you tighten these muscles. Hold.... and relax. Let all the tension go. Feel your back comfortably relaxing into a good and healthy posture.

Turn your attention now to the muscles of your chest and stomach. Tighten and tense these muscles. Tighten them further...hold this tension.... and release. Relax the muscles of your trunk.

Finally, tighten the muscles of your face. Scrunch your eyes shut tightly, wrinkle your nose, and tighten your cheeks and chin. Hold this tension in your face.... and relax. Release all the tension. Feel how relaxed your face is.

Notice all of the muscles in your body.... notice how relaxed your muscles feel. Allow any last bits of tension to drain away. Enjoy the relaxation you are experiencing. Notice your calm breathing.... your relaxed muscles.... Enjoy the relaxation for a few moments....

When you are ready to return to your usual level of alertness and awareness, slowly begin to re-awaken your body. Wiggle your toes and fingers. Swing your arms gently. Shrug your shoulders. Stretch if you like.

Consult your doctor if you have any medical condition which you feel may impact on your ability to access the progressive muscle relation activity.

Healthy Staff Rooms

Imagine you have just completed teaching 3c for the morning. It has been very busy, 2 children have argued, 1 child has been sick and there is a huge mess in your room from the science investigation you have been doing, not to mention lots of marking and report writing waiting for you. You head along to the staff room for a few minutes rest. As you arrive in this haven what would you hope to see? The following are suggestions from research carried out with teachers and although every school is different may provide some food for thought.

- Try to keep work related notices to a minimum or at least on one wall / corner of the room. Many staff report that work notices add to the pressure they already feel under.
- Consider having notices up about other events going on in the area such as theatres, dance classes, sports clubs.
- Staff may also appreciate a calming colour in the staff room if possible and some pictures.
- Try to have comfortable furniture in the staff room. Staff are going there to relax and feeling uncomfortable only adds to stress, irritability and the sensation of 'not having a break'. Consider cushions; these do not have to be state of the art, but do promote the sense that staff comfort and chance to have a break are valued.
- Encourage staff to use the staff room. In the research carried out into staff well being having something nice to eat in the staff room was important. Perhaps once a week cakes, fruit or home cooking might be available on a rota basis.
- Consider having designated areas in the staff room if it is big enough – a work area, a social area, a lunch area.
- Ensure good lighting in the staff room and if possible curtains or blinds.
- Depending on the size of the school see if other ways around constant interruptions can be found. For example, do ice packs have to be kept in the staff room? Is there a culture that being in the staff room means that you are constantly available?
- Some staff have proposed having a staff chill out area in another space in school.

- Some staff suggested maintaining weekly sessions of Chill and Chat with a rota for those who wished to join in to set it up.
- By highlighting staff well being and promoting having a short break staff can be made aware of the benefits to both themselves and the children.
- Consider having a staff well being policy or a staff well being working group to establish ways in which staff well being can be promoted within school systems and with small changes.

Teachers noticed the following benefits and advantages of stopping and taking 'time out' at lunchtime just once each week:

- Staff got to know each other better socially.
- 'Stepping out of role' for a short time provided both a mental and physical break.
- The chance to eat and enjoy their lunch.
- A supportive and team spirit.
- Discussion of feeling tired, having a bad day or being overloaded was acceptable.
- They felt refreshed and happier after the break.
- A break from 'work talk'.
- Space to think
- · Feeling more relaxed
- A feeling that staff well being was important and part of the school ethos.

Where to Get Help?

The following provides details of sources of support and help. It is not an exhaustive list.

Teacher Support Network – This service is for those who work in the education sector and their families and can be contacted by telephone or on line. The website provides a wealth of information and fact sheets ranging from managing stress to changes in the curriculum. You can also sign up to receive regular newsletters regarding health and well being. Website **teachersupport.info** telephone contact **08000 562561.**

Talk to your GP or practice nurse.

Your school educational psychologist will be happy to work with your school to identify ways in which to promote staff well being.

Contact your union.

www.teachers.org.uk/workload offers guidance for school in writing a work / life balance policy

The 'Well Read' Library Scheme provides books and audio CDs and DVDs on mental health issues. Participating libraries include: Barrow, Carlisle, Kendal, Penrith, Workington and Whitehaven.

For information about sporting and active clubs and societies contact **www.activecumbria.com**. This website includes details of sport clubs, classes and societies in the area.



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Section 2: Planning for Change

Mental Health and Emotional Wellbeing Policy for Schools

This generalised policy was written by the TaMHS Project Manger in the course of the project, and is based around three waves of provision, universal, targeted and individual, the policy can be adapted by any school setting.

Wave 1 - Universal Provision

What	Why	When	Who	Outcome
Whole school use of SEAL resources	Build up the social and emotional skills of all students with regard to self awareness, managing feelings, motivation, empathy and social skills	Through assemblies, in the classroom and displayed around the school	All staff in school All students	
Healthy School status	To improve the physical and emotional health and wellbeing of students	Government policy regarding Healthy Schools has changed	Government policy regarding Healthy Schools has changed	
Circle time in classrooms	To give students the opportunity to improve emotional literacy, discuss issues and solve problems	Once per week or as / when situations arise	All staff in school All students	
Creative and physical activities for students e.g. art, drama, music, yoga and field trips	Participation in physical and creative activities can lead to improved emotional health and wellbeing	Through the curriculum Through extra curricular clubs Through enrichment activities	School staff Students Outside agencies	
Information for pupils	Providing information for students to help them to access appropriate sources of support	Information available regarding advice lines, leaflets, texting services, internet based information PSHCE lessons	School staff Pastoral staff Outside agencies	
Behaviour management	Processes and structures put in place by school to modify pupil behaviour and increase emotional health	Consistent use of school Behaviour Policy Staff training e.g. restorative approaches	School staff Pastoral staff Outside agencies	

What	Why	When	Who	Outcome
Celebrating success	To raise pupil self esteem and aspirations	In assemblies / in the classroom / praise / target setting / student self assessment / participation in extra curricular activities and out of school activities / opportunities to demonstrate skills / feedback to parents e.g. praise post card	All staff All students Parents / carers	
Information for parents	Providing information for parents to help them access appropriate sources of support	Information available regarding advice lines, leaflets, texting services, internet based information	School staff All parents / carers Outside agencies	
Training for staff	Staff to access training e.g. in mental health awareness	Through INSET, after school training and attending relevant courses	All staff Governors	
Supervision / consultation for staff	Consultation / supervision for staff in relation to working with children with emotional / behavioural difficulties	At set times e.g. timetabled slots When / as needed e.g. following an incident	Member of staff with appropriate training Outside agencies	
Whole school culture change	Staff agreement regarding the importance of student wellbeing and commitment to building staff capacity in identifying and supporting children at risk of or who are experiencing poor mental health Building respectful relationships between all staff and staff and students	By continuing commitment by school leadership towards building capacity and confidence in dealing with mental health issues in school	All staff All students Parents Outside agencies	

What	Why	When	Who	Outcome
Student voice / participation	Students feel that their opinions and views matter and can make a difference	School Council Discussions in class Active listening by staff	All staff All students	
Whole school ongoing assessment of the emotional wellbeing of students	To identify students who are unhappy and / or at risk of and experiencing mental health problems	Use of questionnaires and measures e.g. SDQ in year 3 and year 7	All staff All students Parents Outside agencies e.g. Educational Psychologist	



Wave 2 – Targeted Provision

What	Why	When	Who	Outcome
Identification of vulnerable students / staff awareness of MH risk factors	Pupils can be identified through assessment tools e.g. use of SDQ and / or by staff / parent concerns	On entry to school and, when individuals are at 'risk' e.g. following parental separation, illness or bereavement and / or when behaviour changes	All staff Parents Students SENCo Inclusion Panel Outside agencies	
Nurture Groups	Small group that takes place during the school day, lasts at least two terms and is ideally facilitated by two adults who have received appropriate training	Either one session per school day or for the whole school day X days per week	Facilitators Children experiencing social and emotional difficulties (Boxall profile for assessment) Parents SENCo	
Peer support for pupils	To give students the opportunity to improve emotional literacy, discuss issues and solve problems	Once per week or as / when situations arise	All staff in school All students Trained peer mentors	
Lunchtime clubs for vulnerable pupils	A lunchtime activity club or safe space for vulnerable pupils	Before school Playtimes Lunchtimes	Adult supervision Vulnerable pupils Good role models Pastoral staff Adult facilitator	
Group therapy or group work	Interventions for students experiencing social and emotional difficulties e.g. SEAL small group work, Incredible Years	During the school day e.g. I lesson per week for X amount of weeks	Outside agencies Identified students Good role models Pastoral staff SENCo	
Training for parents	To build up parenting capacity and confidence e.g. Triple P parenting programmes	Usually a short term programme that takes place out of school hours	Parents Pastoral staff Outside agencies	
Support for parents	Some parents would benefit from additional support e.g. family SEAL / access to a Parental Support Advisor (PSA)	Access to family SEAL, 8 week programme that usually happens during the school day Access to additional support outside school	Parents Pastoral staff Outside agencies	

Wave 3 - Individual Provision

What	Why	When	Who	Outcome
Identification of students experiencing MH difficulties / recognition of their positive attributes	Pupils who are already experiencing mental health difficulties (see list below) are clearly identified and have appropriate support in place Children to have the following mechanisms as appropriate: IEP CAF Safeguarding Plan Statement of SEN Dual placement at PRU CAMHS support PEP	On entry into school (for children in Nursery / Reception information should be received by health visitor / pre school Regular reviews	School staff Identified pupils SENCo Key worker Member of staff responsible for Safeguarding in school Parents Outside agencies including: Inclusion support officers Social Care Ed Psychologist Specialist Teachers CAMHS staff Voluntary agencies LACES Foster carers YOS Through MAST	
Individual support for students	Students to receive one to one support for their emotional / behavioural difficulties / guidance in building resilience Students to receive	As needed e.g. twenty minutes per day	School based learning mentor / key worker	
Individual therapy / counselling for students	the individual support they need for their emotional / behavioural difficulties e.g. cognitive behavioural therapy, counselling	Through agreed sessions	Trained members of staff e.g. CAMHS Voluntary agencies Access to a trained counsellor	
Counselling support for staff	Staff to receive one to support they need for their own emotional well being	As needed	Access to a trained counsellor	

Section 3: Assessment

There has been an increased interest in the assessment of children's mental health and wellbeing. Two systematic reviews of relevant measures commissioned by DCSF and DH were published in 2009. Wolpert et al. (2009) recommended biannual surveys of all children aged 8 years and above in schools and their parents using a quality of life measure, questions about access to help and possibly a measure of social and emotional skills. Humphey et al. (2009) reviewed measures of social and emotional skills and concluded that no single measure could be identified as being fit for the purpose of identifying broadly based improvements in time across the population e.g. scope and range could be limited and all but one measure (Goodman's SDQ) lacked UK norms.

Cumbria County Council, Children's Services, Educational Psychologists can assist schools in using measures of children's health & psychological wellbeing. Educational Psychologists have access to a portfolio of measures (Frederickson and Dunsmuir 2009) which is designed to support staff in schools.

Schools and teachers need to know:

- How they can identify the personal health and wellbeing needs of their pupils
- What interventions they can use to help those children
- How they can evaluate the interventions they use
- How they can measure their success in improving the pupil's overall mental health.

There are seven booklets of measures addressing the following key topics:

- Belonging
- Distress
- Enjoyment
- Healthy Living
- Resilience
- Responsiveness
- Social Behaviour

Cumbria County Council, **Planning for Positive Behaviour** (available in all schools) is a useful resource which contains assessment measures (Pupil Profile) and strategies for increasing student independence and organisation, attention, honesty, reflection and emotional management, co-operation, collaboration, sociability and empathy.

3.1. Student Questionnaires

These questionnaires were used by some of the TaMHS schools in the course of the project (864 student responses in total).



Key Stage 2 – Questionnaire for Emotional Health and Wellbeing

Name:	
Boy or girl:	Year group:
Date:	
Questions about you and your school	
Please answer the following questions:	
For each of the following sections please tick the optio section)	n that best describes you (tick one option for each
I feel happy about my life at the moment	
True Neither true or untrue	Not true Don't know
I have one or more good friends	
True Neither true or untrue	Not true Don't know
When I'm worried about something I can talk to or	ne of my parents
True Neither true or untrue	Not true Don't know
When I'm worried about something I can talk to m	y friends
True Neither true or untrue	Not true Don't know
When I'm worried about something I can talk to ar	adult other than my mum or dad
True Neither true or untrue	Not true Don't know
Which of the following things, if any, do you worry the most worry)	about most? (Tick the three things that cause you
☐ Being bullied ☐ School work	Being healthy Friendships
Getting into trouble My parents or fam	ily My body Something else
Don't know Nothing	
How safe from being hurt by other people do you	feel in school? (tick one option)
☐ Very safe ☐ Quite safe ☐ A bit unsafe	☐ Very unsafe ☐ Don't know

How of	ten, if at all, have you	been	bullie	d at school? (tick one	optic	on)
	Never		Once or	more in the last year		Once or more in the last four weeks
	About once a week		Most da	ys		Don't know
	th of the sections belo (tick one option)	ow, pl	ease ti	ck the option that be	est de	escribes your enjoyment of
	I always enjoy school			I enjoy school most o	of the	time
	I sometimes enjoy sch	nool		I never enjoy school		
	Don't know					
	uch do you feel childre? (tick one option)	en ar	nd your	ng people's views ar	e listo	ened to in the running of your
	A great deal	/	A fair ar	nount		Not very much
	Not at all		Don't kr	OOW		
Which	of these, if any, would	l you	like to	go to that you don't	at the	e minute? (tick all that apply)
	Local park or playgrou	und				
	Cinema or theatre					
	Swimming pool (not in	ı scho	ol lesso	ons)		
	Sports club or class (to	o join	in)			
	A youth club with activ	vities (organis	ed and run by adults		
	Art, craft, dance, dram	na, filr	n / vide	o making (not in schoo	ol less	sons)
	Music group or lesson	າ (not i	in scho	ol lessons)		
	Library / museum					
	Residential course e.g	ງ. outv	ward bo	und		
	Something else					
	Nothing (I don't want to	to go t	to anyth	ing		

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Thank you for completing this questionnaire

Key Stage 3 – Questionnaires for Emotional Health and Wellbeing

Name:	
Boy or girl: Year gro	oup:
Date: School:	
Questions about you and your school	
Please answer the following questions:	
For each of the following sections please tick the option that be section)	est describes you (tick one option for each
I feel happy about my life at the moment	
☐ True ☐ Neither true or untrue ☐ Not true	ue Don't know
I have one or more good friends	
☐ True ☐ Neither true or untrue ☐ Not tru	ue Don't know
When I'm worried about something I can talk to one of my	/ parents
☐ True ☐ Neither true or untrue ☐ Not tru	ue Don't know
When I'm worried about something I can talk to my friend	s
☐ True ☐ Neither true or untrue ☐ Not tru	ue Don't know
When I'm worried about something I can talk to an adult of	other than my mum or dad
☐ True ☐ Neither true or untrue ☐ Not true	ue Don't know
Which of the following things, if any, do you worry about the most worry)	most? (Tick the three things that cause you
☐ Being bullied ☐ School work ☐ Ex	cams Girlfriends / boyfriends
Being healthy Money Fr	iendships My future
Getting into trouble My parents or family Cr	rime My body
Something else Don't know No	othing
How safe from being hurt by other people do you feel in s	chool? (tick one option)
☐ Very safe ☐ Quite safe ☐ A bit unsafe ☐ Ve	ry unsafe Don't know

How of	ten, if at all, have you been bullied at school? (tick one option)
	Never Once or more in the last year Once or more in the last four weeks
	About once a week Most days Don't know
For eac	ch of the sections below, please tick the option that best describes your enjoyment of
school	(tick one option)
	I always enjoy school
	I sometimes enjoy school
	Don't know
How m	uch do you feel children and young people's views are listened to in the running of your
school	? (tick one option)
	A great deal A fair amount Not very much
	Not at all Don't know
Which	of these, if any, would you like to go to that you don't at the minute? (tick all that apply)
	Local park or playground
	Cinema or theatre
	Swimming pool (not in school lessons)
	Sports club or class (to join in)
	A youth club with activities organised and run by adults
	Art, craft, dance, drama, film / video making (not in school lessons)
	Music group or lesson (not in school lessons)
	Library / museum
	Residential course e.g. outward bound
	Something else
	Nothing (I don't want to go to anything
What, i	f anything, would do most to make your life better? (tick one option only)
	More help to do better in school
	Better school lessons
	Less bullying
	More organised activities and things to do
	More places to go where I can spend time with my friends
	More say in how things are run in school or the local area
Ц	More ways I can volunteer or help people
	More advice about being healthy
	More help to plan for my future
	More help to stay safer in school or the local area
	Something else
	Don't know
	None of these

Thank you for completing this questionnaire

3.2. Goodman's Strengths and Difficulties Questionnaires

The Strengths and Difficulties Questionnaire is a measure of adjustment and behavioural, social and emotional difficulties in three to sixteen year olds which is widely used as an outcome measure for child and adolescent mental health in the UK.

The questionnaire consists of five scales (of five items each): Emotional Symptoms Scale, Conduct Problems Scale; Hyperactivity Scale; Peer Problems Scale; and Prosocial Scale. Parallel versions are available for completion by teachers, parents / carers and young people.



The applicability of items over the last six months to the child in question are rated using a three point scale: 'Not True', 'Somewhat True', or 'Certainly True'.

The questionnaires and scoring instructions are available free to download from **www.sdqinfo.com**.

The following questionnaires and scoring sheets are included in **Appendix 3**:

P 3 / 4 SDQ and impact supplement for the parents of 3 (and 4) year olds

P 4 - 16 SDQ and impact supplement for the parents of 4 - 16 year olds

T 3 / 4 SDQ and impact supplement for the teachers of 3 (and 4) year olds

T 4 – 16 SDQ and impact supplement for the teachers of 4 – 16 year olds

S 11 – 17 SDQ and impact supplement for self completion by 11 – 17 year olds

Scoring instructions for versions completed by parents or teachers

Scoring instructions for self – report versions

Section 4

4.1. Transition Plans: to support transition from Primary to Secondary School

These generalised lesson plans were created by Lyz Duclos, Janet Edgar and Linda Molloy, Cumbria County Council, Children's Services with the aim of supporting transition for students from Key Stage 2 to Key Stage 3.

These resources were piloted during the TaMHS project in Cumbria, they were used with groups of children who were transferring from year 6 into year 7 but were also adapted to use with a group of year 7 students who had found the transition from primary to secondary school 7 difficult.

Learning Outcomes:

 To identify feelings around transition: to understand why we have these feelings and how to handle them

 To recognise how secondary school may be different to primary school: to have the confidence to manage changes

 To recognise when we have a problem: to have simple but effective problem solving methods

 To explore and consolidate a range of coping strategies

 To recognise the importance of being a good friend: to recognise positive friendships skills in others

 To explore realistic goals: to be able to recognise positive goals to help with the process of 'moving on' and transition

The supporting materials for the transition planning can be found in **Appendix 4.**



Targeted Mental Health in Schools – Transition Support – Small Group Work Session 1 – Feelings

Learning Outcomes:

- · To identify feelings around transition
- To understand why we have these feelings and how to handle them

Resources required:

- Lesson plan - Flip chart - Evaluation - Feelings Wall - Melanie's Story - Feelings Road

Activity	Timescale
Activity One:	5 mins
Circle activity:	
Each group member to introduce themselves and name one thing they enjoy doing.	
Activity Two:	5 mins
Group rules: brainstorm possible rules for group sessions and collect ideas on flip chart.	
Consolidate three main rules and confirm.	
Activity Three:	5 mins
Evaluation of feelings about transition: complete evaluation and discuss.	
Activity Four:	10 mins
Introduction to feelings about transition: discuss how group feel about moving to Secondary school	
and add feelings to Feelings Wall. Explain that feelings can be moved around, added and removed	
throughout the sessions. Feelings Wall will be revisited throughout and used as a measure of how	
each group member feels about different aspects of transition.	
Activity Five:	20 mins
Melanie's Journal (from SEAL Yr 5/6 Changes resource):	
Read and use provided questions for discussion.	
Use Feelings Road worksheet to map feelings at different stages of the story.	
Activity Six:	10 mins
Spider's web of feelings: use a ball of wool to pass from pupil to pupil forming a spider's web, while	
pupils name a feeling they have to demonstrate diversity of feelings. Finally untangle and discuss.	
Activity Seven:	5 mins
Circle activity: Each group member to name a positive feeling he or she feels about moving to	
Secondary school.	

Targeted Mental Health in Schools – Transition Support – Small Group Work Session 2 – Self Organisation and Management

Learning Outcomes:

- To recognise how Secondary school may be different to Primary school
- To have the confidence to manage the changes

Resources required:

- Feelings Wall - 2 sets of differences cards - quiz worksheet

Activity	Timescale
Activity One: Circle activity: First round: each group member to name one aspect they know will be different in Secondary school. Second round: each member to name one thing they have done independently (for themselves) today.	5 mins
Activity Two: Re-visit Feelings Wall – add new feelings and discuss. Feelings can be moved up and down in order or strength if they are stuck on with blu-tack.	5 mins
Activity Three: Part One: Differences activity – each pair use a set of differences cards to match pairs (blue for Primary orange for Secondary). Part Two: Separate the differences cards into two groups – 'confident to manage' and 'not confident to manage', explaining that in Session 4 we will be learning strategies to help manage different situations.	15 mins
Activity Four: Generate ideas within the group to generate ideas of how to deal with the situations in the 'not confident to manage' pile, again reminding that we will deal with these in Session 4.	10 mins
Activity Five: Quiz activity: Find Your Way Around The School Day worksheet	15 mins
Activity Six: Circle activity: Each group member to name something helpful they are taking away from today's session.	10 mins

Targeted Mental Health in Schools – Transition Support – Small Group Work Session 3 – Problem Solving

Learning Outcomes:

- To recognise when we have a problem
- To have a simple but effective problem solving model

Resources required:

- Feelings Wall - 5 stage problem solving model - 5 stage worksheet - problem cards - Year 7 letters

Activity	Timescale
Activity One:	5 mins
Circle activity:	
Each group member to name one thing they are good at and do not have a problem with.	
Activity Two:	5 mins
Review of previous session with any questions or comments.	
Re-visit Feelings Wall – add new feelings and discuss. Feelings can be moved up and down in order of strength if they are stuck on with blu-tack.	
Activity Three:	25 mins
Part 1: How do I know I have a problem? direct back to Feelings Wall and ask group members to	
identify feelings which might suggest they have a problem (e.g. worried, scared, and unsure).	
Part 2: Introduce and talk through 5 stage problem solving model using a simple example if	
necessary.	
Part 3: Each group member chooses a problem from the set of problem cards and completes the 5 stage problem solving worksheet.	
Activity Four:	15 mins
Introduce and read letters from Year 7 pupils, discussing facts and myths. Keep it positive!	
Activity Five:	10 mins
Circle activity:	
1st round: Each group member to name one thing they feel more positive about regarding	
Secondary school.	
2nd round: Each group member to name one problem they could now solve.	

Targeted Mental Health in Schools – Transition Support – Small Group Work Session 4 – Coping Strategies

Learning Outcomes:

To explore and consolidate a range of coping strategies

Resources required:

- A4 timetables - summary chart - pocket prompt book instructions - scissors and stapler

Activity	Timescale
Activity One:	5 mins
Circle activity:	
Each group member to name and explain one thing they can do now that they couldn't do in Year 6	
(e.g. play a new sport or name a newly learned fact).	
Activity Two:	10 mins
Review of previous session: verbally review 5 stage problem solving model and invite accounts of	
any problems solved this week.	
Activity Three:	10 mins
Learning about learning activity: look at learning styles and complete worksheet quiz. Discuss	
differences and make comparisons between styles.	
Activity Four:	10 mins
Timetable activity:	
Hand out A4 timetables and ask group members to think about where they are having any difficulties	
(academically or socially). Colour lessons in as follows:	
Lessons they find difficult – red	
Lessons in which they might need a little help – orange	
Lessons where they can work independently – green	
(focus could be on either learning or behaviour here, or both if appropriate). Count and transfer to	
summary chart.	
Look at 'red' lessons and discuss coping strategies (e.g. ask for help, quiet hand up, etc)	
Activity Five:	20 mins
Coping strategies pocket book activity:	
Assemble book as instructed and write coping strategies on each page. Book can be used as a	
pocket prompt in school.	
Activity Six:	5 mins
Circle activity:	
Each group member to show and explain one coping strategy from his pocket prompt book and	
explain when he/she might use it.	

Targeted Mental Health in Schools – Transition Support – Small Group Work Session 5 – Friendship Skills

Learning Outcomes:

- To recognise the importance of being a good friend
- To recognise positive friendship skills in others

Resources required:

- worksheet: why friends are important - 2 sets of friendship cards - 1. & 2. worksheets

Activity	Timescale
Activity One:	5 mins
Circle activity:	
Each group member to name one thing that makes them a good friend.	
Activity Two:	5 mins
Review of previous session: check location of coping strategies pocket book and briefly revisit coping strategies.	
Activity Three:	5 mins
Worksheet activity: Why friends are important.	
Activity Four:	30 mins
Friendship cards activity:	
Part 1: each group work together to divide cards into two groups – 'a good friend' and 'a not so good friend'.	
Part 2: using only the 'good friend' cards prioritise in order of importance (group member may not agree on order).	
Part 3: Use the top five cards to discuss how you would ensure you always used those five	
friendship skills.	
Activity Five:	10 mins
Worksheets:	
1. Where are your friends?	
2. Which friend would you choose for which activity?	
Activity Six:	5 mins
Circle activity:	
Each group member to name one friendship trait they value in a friend and why.	

Targeted Mental Health in Schools – Transition Support – Small Group Work Session 6 – Setting Goals and Moving On

Learning Outcomes:

- · To explore realistic goals
- To be able to recognise positive goals to help with the process of moving on and transition

Resources required:

- final evaluation - Feelings Wall - goals worksheet: famous person - goals worksheet: what would you like to do?- lifeline worksheet - inspirational poster

Activity	Timescale
Activity One: Circle activity: Each group member to name one thing that they are looking forward to in the future and explain why.	5 mins
Activity Two: Review of previous session: check if any group members have practised any of the new skills from the previous sessions and discuss.	5 mins
Activity Three: Evaluation: complete end evaluation and compare with same completed at beginning of sessions. Re-visit feelings wall – take off any negative emotions and discuss why, rearrange in order of strength if appropriate and discuss any changes in feelings.	10 mins
 Activity Four: Goals worksheet: famous person - Thought shower the words to describe the qualities and attributes of the person. These qualities can be used as aspirations or goals that the pupils might then plan to achieve. The poster re inspiration is then used as discussion. Goals worksheet: What would you like to do? Lifeline activity: fill in milestones on lifeline worksheet (e.g. birthdays, birth of siblings, joining cubs, winning awards, learning to swim, etc). 	30 mins
Activity Five: Circle activity: Each group member to name one goal they are aiming for, why they want to achieve it and how they will do this.	10 mins

4.2. Small Group Silver SEAL including Top Tips

The Key Stage 2, Small Group Silver SEAL materials are included on the accompanying CD.

There is a CD Rom titled Primary National Strategy, Excellence and Enjoyment: social and emotional aspects of learning, Small group work to develop children's social, emotional and behavioural skills DfES 1728-2005CDO-EN

Top Tips for Small Group (Silver) SEAL

- It is important to ensure whole school commitment for the full run of intervention including leader, room, time, availability of pupils,
- Run sessions in quiet area due to sensitivity of some of the subjects
- Make sure key people in school are fully aware of the objectives
- Make sure all staff in school are fully aware of where small group SEAL fits with other SEAL themes in school
- Make sure school staff are fully aware of the location and content of SEAL resources in school
- Make sure key people in school are involved in the identification and selection of pupils for groups (consider using Goodman's SDQ or similar)
- Always have positive role models in the group
- Build in planning and preparation time
- Use consistent behaviour management techniques, preferably building on techniques used in the classroom
- Make it fun (to encourage engagement)
- Don't be afraid to differentiate the materials as appropriate to age and ability
- Consider using resources and activities from other SEAL themes to meet the needs of the group
- Measure progress with simple measures such as Goodman's SDQ
- It is important to collect the opinions of children via simple, age appropriate evaluation
- Consider sending parent letters to inform of weekly themes and provide opportunities for reinforcement at home
- Have regular meetings with class teachers to inform them of progress and share successful strategies

4.3. Family SEAL including Top Tips

The Family SEAL materials are included on the accompanying CD.

Top Tips for Family SEAL

- Plan early for optimum engagement
- Consider wording flyers carefully as appropriate to target group
- Utilise opportunities when parents are already in school for other events
- Get school staff on board, provide them with the knowledge needed to promote Family SEAL
- Set ground rules from start re place, time, cost of resources and photocopying, child care, staff involvement and reinforcement, etc
- Involve co-facilitator in weekly planning and provide them with full set of plans for future use
- Build in planning time for future sessions (generic plan or activities might need to be adapted to the group)
- Consider the resources required in advance
- Advantageous to have practical activities during the first part of the session to break up the Power Points and promote teamwork
- School staff to be aware of the timing for collection and return of children to prevent disruption to lessons
- Parents seem to place value on handouts (they liked having a folder)
- Consider having an open ended time at end of sessions for chat, consultation and questions (parents often wanted to talk after session)
- Consider having open ended time at end of whole session so that families can complete practical activities (these often took longer than planned)
- Use additional Gold set SEAL materials as suggested to reinforce learning
- Build in time during the final session for evaluation and be available to support parents in recording their opinions

4.4. Power Points for Students

These Power Point presentations were created by the Project Manager for teachers to use with their classes e.g. during PSHCE lessons. The presentations were piloted with groups of students and amended according to student and teacher feedback.

The presentations cover the following:

- Importance of Mental Health
- How to Take Action
- Relationship





Section 5: Signposting

5.1. List of contacts

Child and Adolescent Mental Health Services (CAMHS):

CAMHS Carlisle: Fairfield Centre, Carlisle: 01228 603017

CAMHS Workington: Hopegill Centre, Workington: 01900 705800

CAMHS Barrow: Fairfield Centre, Barrow: 01229 841300

Children's Centres

Carlisle and Eden

Centre	Manager	Email	Telephone
Carlisle West Newtown	Nicki Robley	nicky.robley@barnardos.org.uk	01228 223419
Carlisle West Morton	Nicki Robley	nicky.robley@barnardos.org.uk	01228 223419
Carlisle South Pettril Bank Also satellite centre Upperby CDC	Sheraton Shaw	sheraton.shaw@barnardos.org.uk	01228 625937
Carlisle South Botcherby Also satellite Harraby Community Centre	Sheraton Shaw	sheraton.shaw@barnardos.org.uk	01228 625937
Carlisle North	Julie Fletcher	julie.fletcher@barnardos.org.uk	01228 792130
Carlisle Rural	Julie Fletcher	julie.fletcher@barnardos.org.uk	01228 792130
North Eden (Penrith) Also satellite: Penrith Children's Centre	Rachel Head	rachel.head@barnardos.org.uk	01768 899022
South Eden Also 2 satellites: Kirkby Thore and Kirkby Stephen	Rachel Head	rachel.head@barnardos.org.uk	01768 899022

Allerdale and Copeland

Centre	Manager	Email	Telephone
West Allerdale Also satellites: Flimby Child & family centre and Maryport Child & Family Centre	Zoe Lenaghan	zoe.lenaghan@barnardos.org.uk	01900 819190
Workington Also satellites: Victoria Infant School, Ashfield Juniors and Northside Community Centre	Steph Crosthwaite	stephanie.crosthwaite@ actionforchildren.org.uk	01900 706140
Distington Also satellite: Distington Primary School	Steph Crosthwaite	stephanie.crosthwaite@ actionforchildren.org.uk	01900 706140
Derwent Valley: bases in Keswick and Cockermouth	Steph Crosthwaite	stephanie.crosthwaite@ actionforchildren.org.uk	01228 888330

Centre	Manager	Email	Telephone
North Allerdale	Diane Bell	diane.bell@barnardos.org.uk	016973 49555
(The Family Place, Wigton) Also			
satellites: Aspatria, Silloth, Toy			
Library Wigton, Wigton Infants			
South Whitehaven	Russell Norman	russell.norman@howgill-centre.co.uk	01946 62681
North Whitehaven (Hensingham)	Russell Norman	russell.norman@howgill-centre.co.uk	01946 62681
Also satellite: St Gregory & St			
Patrick's School			
Egremont	Russell Norman	russell.norman@howgill-centre.co.uk	0845 5436907
North-east Copeland (Frizington)	Russell Norman	russell.norman@howgill-centre.co.uk	01946 810846
Also satellite: Cleator Moor			
Millom	Lesley Hazeldine	lesley.hazeldine@actionforchildren.	01229 776374
		org.uk	

Furness and South Lakes

Centre	Manager	Email	Telephone
Greengate, Barrow	Dave Morrison	dave.morrison@actionforchildren.	01229 820049
		org.uk	
Newbarns, Barrow	Dave Morrison	dave.morrison@actionforchildren.	01229 871974
		org.uk	
Bram Longstaffe, Barrow	Joyce Hawthorn	joyce.hawthorn@actionforchildren.	01229 824602
Also satellite: Walney		org.uk	
Hindpool, Barrow	Lisa Scott	lisa.scott@actionforchildren.org.uk	01229 829320
Also satellite: Ormsgill			
Dalton	Neil Gillson	neil.gillson@actionforchildren.org.uk	01229 407790
Ulverston	Neil Gillson	neil.gillson@actionforchildren.org.uk	0845 5436913
West South Lakeland (Milnthrope)	Anne Armstrong	anne.armstrong@barnardos.org.uk	015395 64896
Also satellite: Flookburgh			
Egremont	Anne Armstrong	anne.armstrong@barnardos.org.uk	01539 722267
North-east Copeland (Frizington)	Anne Armstrong	anne.armstrong@barnardos.org.uk	01539 722561
Also satellite: Cleator Moor			
Millom	Anne Armstrong	anne.armstrong@barnardos.org.uk	015394 88035

Cumbria County Council, Children's Services

To access services please refer to your latest School Directory

Health and Wellbeing Team

Manager: Anne Sheppard anne.j.sheppard@cumbria.gov.uk

Carlisle and Eden

Health and Wellbeing Officer: Sue Milner sue.milner@cumbria.gov.uk
Business Support: Leeanne Gilpin sue.milner@cumbria.gov.uk

Allerdale and Copeland

Health and Wellbeing Officers:

Siobhan Bowness siobhan.bowness@cumbria.gov.uk
Eileen Teasdale eileen.teasdale@cumbria.gov.uk
Business Support: Lisa Worthington lisa.worthington@cumbria.gov.uk

Furness and South Lakes

Health and Wellbeing Officers: Gill Schwer Lindsey Ormesher

Business Support: Gill McGregor

gill.schwer@cumbria.gov.uk lindsey.ormesher@cumbria.gov.uk gillian.mcgregor@cumbria.gov.uk





Appendix 1:

Information sheets from The National Strategies, Inclusion Development Programme, Supporting pupils with Behavioural, Social and Emotional

Difficulties

Asset 1.3 Definition of attachment

Attachment is the 'lasting psychological connectedness between human beings' (Bowlby, 1969, p. 194). Attachment essentially refers to the *nurturing* bond of physical and emotional love and care formed between a parent and their child in the early years of development. Research demonstrates that children who begin their lives with the essential foundation of secure attachment fare better in all aspects of functioning as development unfolds. According to 'Attachment theory' this first bond in the child's life becomes the base from which all other relationships are formed.

Commentary

Some children may have had disrupted early years with limited opportunity to build secure emotional attachments. A range of factors may occur after birth that interfere with normal attachment bonding processes. These may include the lack of emotional and physical care, abuse and neglect, lack of a secure and stable environment, death of a parent, adoption or the lack of ability to form an emotional bond by the primary caregiver. Attachment theorists state that the first three years of a child's life are of primary importance for the foundation of secure attachments and the basis for the development of emotional functioning.

Children who have experienced impaired bonding and attachment may, depending on the level of early experiences, have strong feelings of rejection, experience insecurity and have difficulties in forming relationships with both adults and peers. Problems that result from impaired attachment can range on a continuum from mild difficulties with interpersonal skills to profound emotional and behavioural difficulties. Support for children who have attachment disorders will include work on:

- raising self-esteem
- pro-social skills
- emotional literacy
- forming friendships
- resilience
- building trust and empathy.

Nurture groups and Circle Time in school provide a safe environment and structure for children with attachment disorders to experience success and develop interpersonal skills.

With thanks to Behaviour4Learning http://www.behaviour4learning.ac.uk/ethesaurus.aspx?menu=10127

Reading:

Bennathan, M. and Boxall, M. (1996) *Effective Intervention in Primary Schools: Nurture Groups*, David Fulton, London

Bowlby, J. (1969) Attachment and Loss, Penguin Books, Harmondsworth

Asset 1.4 National CAMHS review diagram showing resilience and risk factors Taken from Children and young people in mind: the final report of the National CAMHS Review (2008), p. 22.

Figure 1: Risk and protective factors Community/environmental Community/environmental protective factors risk factors Socio-economic disadvantage Wider support networks Family Family risk factors protective factors Parental conflict At least one good Family breakdown Individual Individual parent-child relationship Homelessness protective factors risk factors Access to sport and Inconsistent or leisure amenities unclear discipline Gender (female) Learning difficulty or disability Affection Academic failure Hostile and rejecting Good communication skills Low self-esteem relationships Specific developmental delay Supervision Believing in control Failure to adapt to a child's Communication problems changing needs Humour Genetic influences High standard of living Disaster Authoritative discipline Low IQ Physical, sexual and/or Religious faith Difficult temperament emotional abuse Capacity to reflect Physical illness, especially if chronic and/or neurological Severe parental mental Support for education health problems Higher intelligence Substance misuse Parental criminality or substance addiction Supportive parental relationship/ Schools with strong Death and loss, including absence of severe discord Discrimination academic and non-academic loss of friendships opportunities Good housing Unemployment

Sources: Audit Commission, 1999 and Mental Health Foundation, 1999¹⁹

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Asset 1.7 Helping children with anxiety and depression

Extract from *Promoting Children's Mental Health within Early Years and School Settings*, DfEE (2001), section 4.3, Emotional disorders.

[This extract is from an important document that is often recommended in the current DCSF BESD guidance (2008). Its content has particular relevance to children with BESD.]

Emotional disorders

Emotional disorders refer to the whole range of emotional problems that are experienced by children. The majority of children are miserable on occasions, and the ability to understand and resolve minor setbacks or difficulties is a central part of a child's psychological development.

However, for some children, their experience of depression or anxiety can significantly impact on their ability to develop, to learn or to maintain and sustain friendships. Many children who experience other mental health problems, those with conduct problems for example, are also often miserable and anxious.

In children, depression can impact on cognitive development, socialisation, family relationships and behaviour. Associated symptoms include: reduction or loss of ability to experience pleasure; low self-esteem, guilt, helplessness, hopelessness, suicidal thoughts and acts; loss of energy; poor concentration; restlessness; and changes in appetite, weight and sleep.

In childhood the range of depressive symptoms may include refusal or reluctance to attend school, irritability, abdominal pain and headache. Children who are depressed often present with non-specific symptoms such as physical complaints, irritability, withdrawal, or they may express feeling unhappy or miserable.

In adolescence, young people who are depressed may appear to:

- be overly irritable;
- have insomnia or sleep excessively;
- lose their appetite or have a noticeably increased appetite;
- have a noticeable weight change, usually loss;
- experience suicidal thoughts or self-harming behaviour;
- have poor concentration and loss of interest in previously enjoyed activities;
- experience fatigue and negative thoughts of being useless, inadequate, ugly, guilty and hopeless about the future;
- be aggressive; and
- show a marked decline in educational performance.

Such feelings may affect the young person in that they will:

- have difficulties in getting on with friends or family;
- experience a loss in confidence and difficulty in making decisions;
- be unable to study or perform such tasks such as taking exams; and
- experience difficulty in getting up each morning and facing the day.

Those factors which make children and young people vulnerable to depression include: family breakdown, death or loss of a loved one, neglect, abuse, bullying and other adverse life events.

How can schools identify children who are depressed or anxious?

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Being able to ascertain whether a child is depressed or anxious is an area that is quite complex – and many mental health practitioners are currently working towards developing effective instruments in order to be able to do so themselves. However, there are ways in which teachers and schools can play an important role in assessing whether children might require initial or more specialist help and support.

Anxiety and depression in children and young people is often missed. This may be due to a number of factors:

- a belief that children do not experience anxiety or depression and a consequent lack of awareness of the symptoms that the child is presenting with;
- symptoms that may alert us to depression can be dismissed as being 'part of adolescence'. Irritability can be mistaken for 'difficult behaviour';
- sometimes professionals judge the child or young person's presentation as understandable under the circumstances, for example, if a child has been bereaved or abused:
- the belief that if the stressful situation is relieved, the problems will subside;
- if the child or young person is displaying somatic problems, the focus may be fully focused on the physical rather than the emotional signs or symptoms; or
- professionals may not be sure of what to do next, and consequently do not ask relevant questions for fear of upsetting the young person.

It is therefore important that teachers and schools are able to initially assess whether a child or young person is experiencing emotional problems which are severely impacting on them.

Can schools help children who are depressed or anxious?

The following approaches are effective in working with children and young people who are depressed:

- Working with the child/young person to help manage any underlying school problems. Many children and young people may become anxious or depressed as a result of bullying within school, or due to worries about school work or exams, for example. Schools which have strong policies to prevent bullying, and strong pastoral systems where children can discuss any worries that they may have and which can be acted upon promptly, can be particularly effective in helping prevent long-term problems from developing.
- Schools can implement social skills training for pupils, which can improve selfesteem and interpersonal relationships. Such work is particularly important for building resilience amongst those children and young people more at risk of experiencing anxiety and depression than their peers.
- Counselling approaches to working with children and young people. Many schools currently offer counselling type services for children and young people. These are held to be particularly important for those children who are anxious or depressed. Whilst research has failed to show the long-term benefits of counselling type approaches for children and young people who are depressed, many children and young people themselves have reported the benefits of such approaches. What appears to be important for many young people is having someone to talk to, being properly listened to and having their difficulties taken seriously.
- For many children and young people who are depressed, short-term cognitive behavioural therapy (CBT) can be effective. Mental health professionals, such as child psychiatrists, or psychologists often outside school, can deliver such an approach. This approach helps the child/young person in the following way the

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cognitive component is designed to alter negative thoughts, improve-self esteem and enhance coping skills, whilst the behavioural aspect of the therapy is designed to increase the child or young person's involvement in normal and rewarding activities. Often such treatment may be undertaken during school hours, and schools can play an important role in destignatising help of this kind.

 The use of medication for children and young people experiencing depression is controversial. There has been generally negative evidence on the effectiveness of drug therapy for children and young people.

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Asset 2.2 Key characteristics that promote pupils' mental health

From *Promoting Children's Mental Health within Early Years and School Settings*, DfEE (2001), section 2.3 Primary and Secondary School Settings.

There are key characteristics which schools that promote their children's and young people's mental health share:

- a committed senior management team, creating a culture within the school in which the importance of trust, integrity, democracy, equality of opportunity and each child being valued regardless of their ability is seen as being vital;
- a culture within the school which values teachers, lunchtime supervisors, and all those engaged in the care and supervision of children;
- clear policies regarding such vital issues as behaviour and bullying 'whole-school behaviour' policies which set out the range of acceptable behaviour for children, what is and what is not acceptable;
- the range of sanctions that will result and the acceptance and implementation of the policies throughout the school;
- high professional standards (efficient planning, setting, marking, punctuality);
- skilful teaching which arouses pupil interest and motivates; and
- proactive work with parents.

The importance of a value system within the school, which embraces all children, is particularly important. Such schools, particularly primary schools, are often also engaged in a whole range of work to actively promote emotional and social learning amongst the staff, parents and pupils; from emotional literacy programmes, parenting programmes, circle time and specific initiatives for vulnerable children.

The document also emphasises 'the importance of work in schools that is positively aimed at promoting the mental health of all children, rather than an approach which is solely focused on work with those children already displaying difficulties. Such an approach has been shown to have very real pay-offs for those children who are most at risk of developing problems.'

Asset 2.9 Developing a positive mind-set

Topics to discuss with colleagues that help you develop a positive mind-set that will improve the behaviour of difficult groups and individuals:

- Keep a balanced view of the problem.
- Welcome the conflict as an opportunity to develop new skills have a view of the future.
- Do not blame yourself.
- Get some help talk about it.
- Have the view that bad behaviour is logical.
- Be a detective develop a hypothesis [look for clues when the behaviour is not happening].
- Consider the 'motive' for the 'crime' is probably about getting needs met.
- Try something different regard the process of experimentation as a success.
- Do as little as possible think small, go slow.
- Notice the effects of what you do and value those effects.
- Do not be pulled out of shape [dabble too much/ chop and change/ be pulled all over the place] – think jazz [try creative variations around a central basic structure, which you keep in mind and to which you return].
- Stay in touch with your basic values.
- Be optimistic behaviour can change.

Galvin, P (1999) Behaviour and Discipline in Schools: Practical Positive and Creative Strategies for the Classroom, David Fulton Books, London. Copyright © Peter Galvin. Used with kind permission.

Asset 2.11 The importance of the physical environment

Extracts from 'Managing Challenging Behaviour, Ofsted (2005), p. 20-21

A welcoming environment

- The quality of accommodation and of the learning environment has a significant impact on the behaviour of pupils and students; it should not be underestimated.
- Too few schools involve pupils in the design, maintenance and improvement of buildings to foster a sense of belonging and help to reduce vandalism.
- The lack of a quiet room which pupils can go to calm down is a handicap for those with more challenging behaviour.
- 83. The physical environment is generally better in the early years settings and primary schools than in the secondary schools, special schools, PRUs and some general FE colleges. It is good in less than one in five of the secondary schools and one in three of the PRUs.
- 84. The quality of the learning environment has a significant impact on the behaviour of pupils and students. A welcoming and stimulating environment tends to foster good behaviour. In many schools senior staff are aware of the impact that the environment has on behaviour and they seek to ensure that the cleanliness and brightness of accommodation are maintained. A high priority is placed on the condition of the buildings and much thought is given to how they are used. When damage occurs it is quickly repaired. High-quality displays celebrating pupils' achievement are evident in communal areas and classrooms.
- 85. Such an environment is likely to result in pupils having pride in their place of learning which, in turn, has a positive impact on their attitudes and behaviour. In the primary schools where play areas for younger children are well organised and supervised, poor behaviour is reduced. The schools which have organised lunchtime activities notice an improvement in behaviour. Those which try to involve pupils in the design, improvement and maintenance of the buildings find this fosters a sense of belonging, helps to develop positive attitudes and reduces vandalism. Too few of the schools involve pupils in this way.

The school has made the improvement of the environment a high priority. The playground has been redesigned with areas designated for team games, a shelter, painting area, rebound wall and benches. Pupils report that the playground is much better now and as a result their behaviour has improved.

- 86. A poor quality environment has a negative impact on behaviour. In some schools, mostly secondary, there are few displays of pupils' work and, where there are, the quality of displays varies noticeably between rooms. In some of the classrooms poor acoustics make it difficult for pupils to hear or to sustain concentration. Some of the schools are untidy and disorganised with unattractive communal areas and confusing layout. Long distances for pupils to travel between lessons often result in lateness and the need for corridor patrols to maintain order.
- 87. The external appearance of the PRUs visited is often poor; in some, but not all, staff make the best possible use of inadequate accommodation. In some special schools there is little space to store resources and equipment. In over half the EBSD schools there are no specialist teaching spaces for subjects including music, ICT,

and design and technology – which are subjects that often motivate pupils. In some of the special schools conditions are cramped; there is no quiet room in which pupils can calm down. This is a major weakness: pupils with challenging behaviour need a place to go to when their behaviour gets out of hand.

88. In a high proportion of the general FE colleges there are few displays of pupils' work, buildings are in a poor state of repair, there are too few recreation facilities for the numbers of students, and corridors are impersonal. These inadequacies have an adverse effect on students' attitudes and behaviour.

Asset 3.1 Active listening

'Active listening' is a helpful strategy to build, maintain and repair relationships with pupils with BESD. It means using your eyes, ears, mind and heart to convey that the pupil has your full attention:

Listen with your ears: I HEAR YOU
Listen with your eyes: I SEE YOU
Listen with your mind: I UNDERSTAND YOU
Listen with your heart: I AM WITH YOU

A good listener:

- Shows warmth, empathy respecting the pupil's feelings;
- Accepts as important that which the pupil sees as important;
- Does not offer unhelpful advice (e.g. 'You don't need to worry about that...';
 'When I was your age, I did not...');
- Is non-judgemental;
- Helps the pupil to find words to express their feelings;
- Re-assures the pupil;
- Answers questions actually asked with honesty (rather than answer questions that should be but are not asked...);
- Respects silence does not rush to fill gaps in talk;
- Is aware of/ takes account of cultural issues (e.g. eye contact);
- Knows what the pupil doesn't say but...

Talking as part of listening:

Active listening also includes *talking* to the pupil. You need to prove you are listening by 'reflecting back' ideas to show the pupil you have understood what s/he has said:

- paraphrasing what is said back to the pupil/young person;
- reflecting the emotions that you are hearing/seeing or sensing;
- using body language to convey your interest e.g. lean towards the pupil/young person, or if the pupil is smaller than you, bend or sit down so that you are on the same level.

If you are really listening to what the pupil says, you should demonstrate this by following some simple ground rules:

- Keep sentences almost as short as the pupil uses;
- Use the pupil's own words;
- Don't repeat wording of questions not understood by pupil: re-phrase;
- Ask pupil to repeat what they have said they will do to check they have understood.

Long, R. and Fogell, J (1999). Supporting pupils with emotional difficulties, David Fulton Books. Copyright © Rob Long and Jonathan Fogell 1999. Adapted with kind permission.

Asset 3.7 What is a nurture group?

A nurture group:

- is a small supportive class of up to 12 children usually in a mainstream Primary School.
- provides a secure, predictable environment where the different developmental needs of each pupil are catered for.
- is staffed by two adults, usually a teacher and a learning support assistant and pupils attend regularly for a substantial part of each week.
- focuses on emotional and social development as well as academic progress.
- ensures pupils remain on their mainstream class roll with an expectation that they will return to their class in 2-4 terms.

Characteristics of nurture groups

Nurture groups have a number of characteristics that should be evident in practice. These were developed by the Nurture Groups Research Project in consultation with members of the Nurture Group Network and staff working in nurture groups. They have been discussed and used extensively by participants on the Certificate course, *The Theory and Practice of Nurture Group Work* and are key elements for the Marjorie Boxall Quality Mark Award.

A nurture group should:

- Be located clearly within the policies and structures of a local authority or school continuum of special educational needs provision, either as an integral part of an individual school or as a resource for a cluster of schools.
- Ensure that children attending the nurture group remain members of a mainstream class where they register daily and attend selected activities.
- Have a pattern of attendance whereby children spend part of each day in the nurture group or attend for regular sessions during the week.
- Be staffed by two adults working together modelling good adult relationships in a structured and predictable environment, which encourages children to begin to trust adults and to learn.
- Offer support for children's positive emotional and social growth and cognitive development at whatever level of need the children show by responding to them in a developmentally appropriate way.
- Supply a setting and relationships for children in which missing or insufficiently internalised essential early learning experiences are provided.
- Ensure that relevant national curriculum guidelines are followed for all children.
- Be taken full account of in school policies, participate fully, and be fully considered in the development and review of policies.
- Offer short- or medium-term placements, usually for between two and four terms, depending on the child's specific needs.
- Ensure placement in the group is determined on the basis of systematic assessment in which appropriate diagnostic and evaluative instruments have been used, with the aim always being to return the child to full-time mainstream provision.
- Place an emphasis on communication and language development through intensive interaction with an adult and with other children.
- Provide opportunities for social learning through cooperation and play with others in a group with an appropriate mix of children.
- Monitor and evaluate their effectiveness in promoting the positive social, emotional and educational development of each child.
- Recognise the importance of quality play experiences in the development of children's learning.

Taken from http://www.nurturegroups.org/pages/what is a nurture group.html Used with kind permission of The Nurture Group Network.

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Asset 3.8 Checklist for arrangements for out of class

Answer the following questions – in general terms and then in relation to children with BESD with whom you work:

		In general			dren O		
		Yes	Some- what	No	Yes	Some- what	No
1	Routines for movement around school site are clear?						
2	Short break time rules understood by pupils?						
3	Short break time systems adopted by all staff?						
4	Lunchtime rules understood by pupils?						
5	Lunchtime systems understood by all staff?						
6	Break times rewards/sanctions system clear?						
7	Behaviour policy adopted by ancillary/ support staff?						
8	Corridors and social areas (including playgrounds) are well designed and monitored?						
9	Problem site areas identified and overcome?						
10	Suitable activities/equipment available for break times?						
11	Is there an effective system for resolution of pupil conflicts?						

Adapted from the Behavioural Environment Checklist, Birmingham Framework for Intervention. Copyright © Birmingham City Council's Children, Young Person and Families Department.

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Asset 3.9 Peer mentoring

From www.teachernet.gov.uk

Over recent years, peer mentoring (PM) has increased in popularity and has been introduced in a number of schools, where it is making a valuable contribution to the overall ethos of the school and pastoral support systems.

Appropriate peer support within school can and does increase the opportunity for personal and social development within individuals; it can also provide additional support and encouragement with aspects of schoolwork, help to build confidence and self-esteem and encourage more positive participation in school life.

After a successful pilot, The Mentoring and Befriending Foundation (MBF) will provide support to schools across England until 2011. The National Peer Mentoring programme will enable young people to build friendships and provide support and advice to one another in schools. The programme will work in schools and colleges and involves young people being trained to mentor their peers, listen to their problems and engage other young people in the community.

The national programme is designed to apply to all young people in pre- and post-16 education. It follows a successful pilot scheme which involved 180 schools and engaged with 3600 pupils. The pilots focused on attainment, behaviour, bullying and transition.

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Asset 4.1 What is a pastoral support programme?

Adapted from DCSF school-attendance website, www.dcsf.gov.uk Search using 'Pastoral support'

The pastoral support programme (PSP) is a school-based and coordinated intervention to help individual pupils to improve their social, emotional and behavioural skills. As a result of a PSP pupils should be able to better manage their behaviour and /or improve their attendance.

A PSP will be needed in particular for those children and young people whose behaviour is deteriorating rapidly. The PSP should identify precise and realistic outcomes for the child or young person to work towards. The PSP will act as a preventative measure for those children and young people at risk of exclusion. A nominated staff member should coordinate and oversee the PSP planning and process. It should be focused on meeting the needs of the child or young person, be practical and manageable. Any PSP should be developed in conjunction with other existing plans and should not be regarded in isolation. If the child or young person has another plan then ideally the PSP should be integrated.

A PSP should not be used to replace the special educational needs process. Rather than set up a separate PSP for pupils with an individual education plan (IEP), schools should ensure that IEPs for pupils at serious risk of exclusion reflect appropriate approaches, strategies and support to meet their additional needs. It may be that professionals consider undertaking a Common Assessment in order to establish how best to support the child or young person. See the Common Assessment Framework quidance, e.g. www.everychildmatters.gov.uk/deliveringservices/caf/

A PSP should be set up for a child or young person:

- who has several fixed period exclusions that may be leading to a permanent exclusion:
- who is identified as being at risk of failure at school through disaffection;
- where the situation is complex and a range of agencies are required to support children and young people.

Setting up a PSP

A PSP needs to be set up in consultation with parents or carers. It is important that schools work in partnership with parents and carers and that each understand their roles and responsibilities in relation to the PSP. To set up a PSP, the school should invite the parents or carers, a local authority (LA) representative and other relevant agencies to discuss the areas of concern and what is required to get back on track, both academically and socially.

The PSP should also specify the agreed support the child or young person and/or the parent/carer needs in order to achieve this. The LA should agree with the school precisely what input, support or monitoring it will offer. LAs may either offer support free of charge to the school, or, if that is its policy, to supplement the school's budget to enable it to buy in the extra support outlined in the PSP. Each school and LA will develop their own solutions related to the particular context. The LA may, alternatively, offer advice, support and guidance to a different school in order that the new school can include and educate the child (see below re managed moves).

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Other agencies will be involved in providing input to the PSP, as appropriate and necessary. For example:

- It may be appropriate for Children's Services to become involved if not already. as they may be able to resolve home problems that contribute to attendance or behaviour difficulties at school. Such links with social workers and other agencies, both statutory and voluntary, are essential for pupils who are looked-after, who are young carers or are on the child protection register. These services may also be involved with other vulnerable children and young people. For looked-after children, the PSP should reflect and ideally be integrated into any other plans, e.g. the education section of the care plan so that the targets and outcomes are known to the social worker and other relevant professionals. Schools should inform the social worker when a looked-after child is failing to achieve the outcomes expected in the PSP; it will be appropriate for the school to inform other agencies if they are already involved with the child or young person. Children's Services are responsible for reviewing all aspects of the care of a looked-after child or young person regularly (at least six monthly and more often if necessary). This should include changes to the education targets in the care plan.
- LA services such as Educational Psychology and Behaviour Support often contribute to PSPs and also guide schools to examine whole school policy and practice in relation to general behaviour and attendance issues.
- Housing departments can help to resolve accommodation difficulties or uncertainties that may be contributing to difficulties at school. The housing department also has an important role in helping to track the whereabouts of children and young people.
- Ethnic minority community groups can help and advise schools as PSPs are drawn up and/or provide specific support such as mentoring programmes.
- The youth service can help to support children and young people both in and out of school. Youth workers might, for example, carry out intensive work with an identified group of non-attenders or young offenders.
- The voluntary and community sector often provided services for children and young people. In some cases it might be appropriate to signpost children and young people to the services offered or to support them in accessing these services.
- Connexions Services can help young people over a range of issues including
 making informed decisions about their future and encouraging them to continue
 learning post-16. Children and young people with PSPs are likely to need
 opportunities to discuss possible future routes with a careers adviser or to be
 supported by a Connexions personal adviser.

In drawing up a PSP schools should, in discussion with others:

- Review learning needs, particularly literacy skills that may be affecting a child or young person's behaviour. If necessary, a learning programme must be put in place immediately. This may include lunchtime or after-school teaching and other forms of study support.
- Review and consider changing, the teaching group or class. The PSP could specify a particular teaching group or define a seating plan. Members of the child or young person's peer group could be identified to act as a positive role model or

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'study buddy'.

- Review social, emotional or behavioural needs that may be affecting behaviour and provide a programme to develop these skills as appropriate.
- Consider, or reconsider, disapplying the National Curriculum to allow time for specific learning activities.
- Consider older pupils or adults with suitable training, acting as mentors.
- Consider the professional development needs of staff. Staff should be given guidance, advice, or other continuing professional development opportunities in relation to meeting the range of needs of children and young people at risk of exclusion and should be given guidance on behaviour management specific to any child or young person with whom they come into contact.
- If the school has a Learning Support Unit, review and consider how the child or young person's needs could be met through such a resource.
- Consider jointly registering the child or young person with another school or a
 pupil referral unit. This would provide the opportunity to benefit from other
 expertise and resources, while the child or young person retains a sense of
 belonging and commitment to his/her own school. This approach aids progress
 towards full integration, at an appropriate point, when the child or young person's
 skills or personal circumstances have improved.
- Consider, with the agreement of the child or young person, parents/carers and
 the receiving school, a managed move to another school. In this case the PSP
 should be developed in partnership with the receiving school. A fresh start, with
 the opportunity to develop new relationships, with the right support and
 resources, can have a positive impact on a child or young person's progress.
- Consider whether the pupil should be offered specialist support, e.g. emotional support or counselling, for bereavement, bullying, alcohol/drug-related or mental health issues and organise this as necessary.

The PSP should:

- use information gathered from a range of sources including, the child or young person, parents and carers, school and other relevant professionals;
- set out specific and realistic targets, and how they will be measured, agreed by all involved, including the child or young person, and broken down into manageable chunks;
- identify the input and support from the school and parents/carers that the child or young person will receive to help him/her reach the agreed targets;
- identify the input and support from all other relevant professionals and agencies that the child or young person will receive to help him/her reach the agreed targets;
- identify the recognition and rewards that the child or young person will receive when they demonstrate efforts to meet the agreed targets;

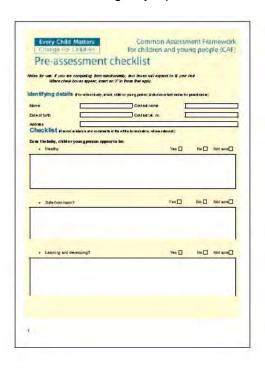
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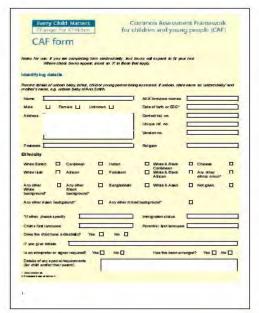
- identify the consequences that will result if the child or young person does not demonstrate efforts to meet the agreed targets, including any sanctions that may be applied;
- identify the time limit for the duration of the PSP, including review dates. Any PSP should be given appropriate time to ensure the pupil has opportunity to demonstrate efforts to improve. A PSP should have a time limit, for example, 16 working weeks. During this time progress should be regularly monitored and adjustments made to the PSP as necessary.

Asset 4:3 The Common Assessment Framework

(more information from www.everychildmatters.gov.uk/caf/)

The Common Assessment Framework (CAF) is a key part of delivering frontline services that are integrated and focused around the needs of children and young people with complex special ('additional') needs. The CAF is a standardised approach to conducting an assessment of a child's additional needs and deciding how those needs should be met. It can be used by practitioners across children's services in England. It involves the completion of a standardised pre-assessment checklist and a detailed full assessment form (see below), and the appointment of a 'lead professional' to implement plans of action and coordinate inter-agency inputs.





The following diagrams and paragraphs 1.10, 4.16 and 6.1 are taken from *The Common* assessment Framework for Children and Young People: A Guide for Practitioners (2009, IW91/0709) pages 14, 31–32 and 43 respectively:

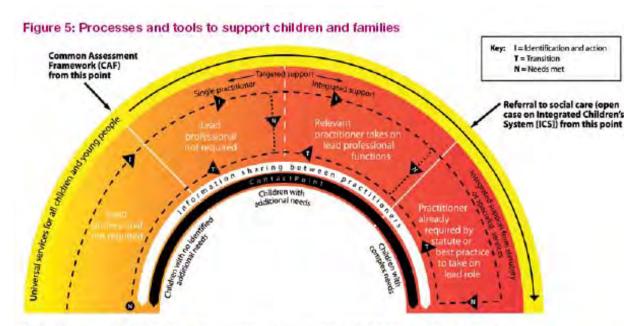
Figure 1: Continuum of needs and services

Note: Diagram is not to scale in representing the proportion of children and young people in each section of the windscreen.

1.10 Within the group of children and young people with additional needs, a small proportion has more significant or complex needs which meet the threshold for statutory involvement. These are:

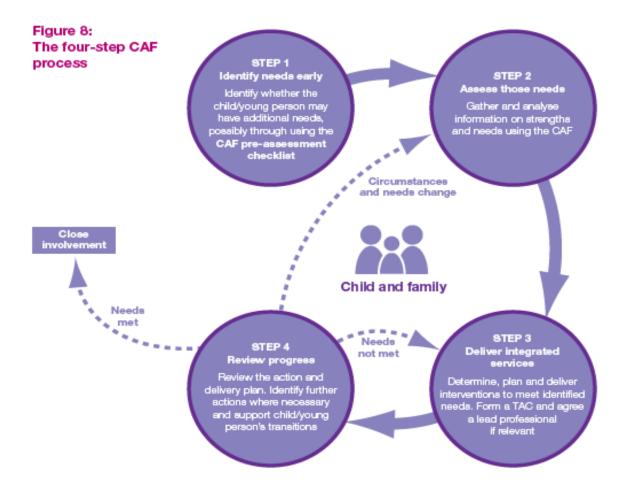
- children and young people who are the subject of a child protection plan
- looked-after children and young people
- care leavers
- children and young people for whom adoption is the plan
- children and young people with severe and complex special educational needs
- children and young people with complex disabilities or complex health needs
- children and young people diagnosed with significant mental health problems
- young offenders involved with youth justice services (community and custodial).

4.16 Figure 5 shows where and how the CAF, the lead professional and information sharing can be introduced to support children, young people and families more effectively.



Note: Diagram is not to scale in representing the proportion of children and young people in each section of the windscreen.

- 6.1 The common assessment process [as illustrated in Figure 5]:
- represents best practice although it is acknowledged that, in some instances, flexibility may be required to meet the specific needs of a child or young person and their circumstances
- is a fluid process that may move forwards and backwards between delivery and review until needs are met – if a fundamental change occurs, reassessment should be considered
- should not put the child or young person, or you, at risk of harm. If you are concerned about any aspect of the process, you should seek expert advice If, at any time during the course of this assessment, you are concerned that a child or young person has been harmed or abused or is at risk of being harmed or abused, you must follow your LSCB procedures. The practice guidance What to do if You're Worried a Child is Being Abused (HM Government, 2006) sets out the processes to be followed by all practitioners.



The Common Assessment Framework. © Children's Workforce Development Council 2009. Used with kind permission.

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Asset 5.1 Self-evaluation resource for the learner

Note: It is planned that this self-evaluation tool is completed by the learner at the start of the resource. It can be used to inform schools of the existing knowledge of BESD and to identify gaps. The learner can complete the checklist again having worked through the units.

Codes used:

K – knowledge

A – possible adjustment to practice

and so	My knowledge and understanding of behavioural, emotional and social difficulties (BESD) and adjustments that can be made to practice			Rate 1–4 1= not very confident 4= very confident				
		1	2 3					
	Introduction: Understanding BESD							
1K	I know the official definitions of BESD							
2K	I understand the factors that create BESD							
3K	I appreciate the difference between 'acting out' and 'acting in' and that both can indicate the presence of BESD							
4K	I know that BESD often overlap with mental health problems							
5A	I understand that my own emotions and practice can decrease or increase pupils' BESD and I take appropriate action							
	Module 1: How BESD develop							
6K	I know that some physical and emotional childhood needs, if neglected, can lead to BESD							
7K	I have some understanding of 'attachment theory' and its relevance to BESD							
8K	I have some understanding of the development of the brain and how this can link to different types of behaviour							
9K	I have some understanding of risk and resilience factors that can help to explain BESD							
10K	I am aware of the overlap between BESD and some pupils' other special or additional needs							
11K	I have some understanding of the overlap between BESD and mental health problems							
12K	I am aware of some assessment tools used to indicate and monitor BESD							
	Module 2: Provision that promotes the inclusion of pupils with BESD							
13K	I am aware of the importance of whole-school approaches that value, respect and address the emotional and social needs of all pupils							
14K	I know how SEAL can help to lessen the negative impact of BESD							
15A	I understand how quality first teaching can help to lessen the impact of BESD							

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and so	owledge and understanding of behavioural, emotional cial difficulties (BESD) and adjustments that can be to practice	1= n confi	e 1–4 ot ver ident ery co	y onfide	nt
		1	2 3		
16A	I understand the importance of Assessment for Learning for pupils with BESD				
17 A	I know how to review my practice to provide a more personalised approach that focuses on the strengths of pupils with BESD and builds their self-esteem				
18A	I know how to review my practice to ensure that my classroom routines are consistent, thereby helping to support pupils with BESD				
19A	I understand how use of positive language and other forms of positive communication is important when working with pupils with BESD				
20A	I know which physical aspects of my classroom to adjust to promote better behaviour				
	Module 3: Helping individual pupils with BESD				
21A	I am aware of factors that develop and maintain positive relationships with pupils with BESD				
22A	I am aware of factors that support pupils with BESD through emotional stress or 'tantrums'				
23K	I understand the importance of maintaining a good 'provision map' and its management to pupils with BESD				
24K	I have a good understanding of how the SENCO can help me to work effectively with pupils with BESD				
25K	I know my school's procedures for raising concerns (e.g. safeguarding issues)				
26A	I know that a flexible curriculum helps to personalise learning for and engage pupils with BESD				
27A	I know the importance of structure, predictability and support at break and lunch times				
28K	I know the importance of supporting pupils with BESD through important transitions (e.g. into a new class or school)				
	Module 4: Support from colleagues, other agencies and parents/carers				
29K	I know the range of support available within the school to help me with pupils with BESD (including pastoral support programmes)				
30K	I am aware of the role of agencies beyond the school in helping include pupils with BESD				
31K	I understand the factors that might make it difficult for my school to engage with parents, families and carers				
32K	I can list the strategies that can be used to engage with the parents of pupils with BESD				

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My knowledge and understanding of behavioural, emoti-				
and social difficulties (BESD) and adjustments that can	be 1= n	1= not very		
made to practice		ident		
	4= v	ery co	nfider	nt
	1	23	4	
Total score out of 128				





Appendix 2:

Staff questionnaire

ACTIVITY 2

What to do

Place your school at a point on the scales below (where 1 indicates poor performance and 10 indicates the best possible performance).

	put great dren, betv	•				•	our schoond adults.	l – betwe	en
1	2	3	4	5	6	7	8	9	10
	_	_				ıd days bı	ut morale i	_	•
1	2	3	4	5	6		8	9	10
	f work tog olems.	gether or	n their pla	anning, a	nd to he	lp each o	ther find s	solutions t	to
1	2	3	4	5	6	7	8	9	10
	providing	suppor	t in comb	ating an	d manag				
<u>1</u>	2	3	4	5	6		8	9	10
and area	adults' w	ell-being for all ch	g – paying nildren to	g attentic call their	n to suc own and	h details and the	and suppas comforeir belong paces.	table sea	ting
1	2	3	4	5	6	7	8	9	10
		-		_			ool and the ging, are t 8	_	-
	children. T	hey mod	del the be	haviours	they pro	, ,	ige and re		
1	2	3	4	5	6	7	8	9	10
to p mak	oor behav	viour, for to follow	example up beha	, by labe	elling the	behaviou	when res r, not the on when	child, and	
1	2	3	4	5	6	7	8	9	10
circl	e time ac	ross the	school, p	beer med talk one	diation ar	nd buddyi	vell-being, ng schem dult when	ies, and	d to.
1	2	3	4	5	6	7	8	9	10



Appendix 3:

Goodman's Strengths

and Difficulties

Questionnaires

and scoring



Strengths and Difficulties Questionnaire

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of the child's behaviour over the last six months.

Child's Name			Male/Female	
Date of Birth	Not True	Somewhat True	Certainly True	
Considerate of other people's feelings				
Restless, overactive, cannot stay still for long				
Often complains of headaches, stomach-aches or sickness				
Shares readily with other children (treats, toys, pencils etc.)				
Often has temper tantrums or hot tempers	= (
Rather solitary, tends to play alone				
Generally obedient, usually does what adults request				
Many worries, often seems worried	111			
Helpful if someone is hurt, upset or feeling ill				
Constantly fidgeting or squirming				
Has at least one-good friend	- 50			
Often fights with other children or bullies them		_ 🗇 _		
Often unhappy, down-hearted or tearful				
Generally liked by other children				
Easily distracted, concentration wanders				
Nervous or clingy in new situations, easily loses confidence	- 107			
Kind to younger children				
Often argumentative with adults				
Picked on or bullied by other children				
Often volunteers to help others (parents, teachers, other children)				
Can stop and think things out before acting				
Can be spiteful to others				
Gets on better with adults than with other children				
Many fears, easily scared				
Sees tasks through to the end, good attention span				

Do you have any other comments or concerns?

	No	Yes- minor difficulties	Yes- definite difficulties	Yes- severe difficulties
If you have answered "Yes", please a	nnswer the following	questions about	these difficulties	:
· How long have these difficulties be	en present?			
	Less than a month	1-5 months	6-12 months	Over a year
• Do the difficulties upset or distress	your child?			
	Not at all	Only a little	Quite a lot	A great deal
Do the difficulties interfere with yo	our child's everyday l	ife in the followi	ng areas?	
	Not at all	Only a little	Quite a lot	A great deal
HOME LIFE				
FRIENDSHIPS				
LEARNING				
LEISURE ACTIVITIES				
• Do the difficulties put a burden on	you or the family as	a whole?		
	Not at all	Only a	Quite a lot	A great deal

Overall, do you think that your child has difficulties in one or more of the following areas:

Thank you very much for your help

Strengths and Difficulties Questionnaire

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of the child's behaviour over the last six months.

Child's Name			Male/Female	
Date of Birth	Not True	Somewhat True	Certainly True	
Considerate of other people's feelings				
Restless, overactive, cannot stay still for long				
Often complains of headaches, stomach-aches or sickness				
Shares readily with other children (treats, toys, pencils etc.)				
Often has temper tantrums or hot tempers				
Rather solitary, tends to play alone				
Generally obedient, usually does what adults request		= 0		
Many worries, often seems worried				
Helpful if someone is hurt, upset or feeling ill				
Constantly fidgeting or squirming		- 10 -		
Has at least one good friend				
Often fights with other children or bullies them				
Often unhappy, down-hearted or tearful		100		
Generally liked by other children				
Easily distracted, concentration wanders				
Nervous or clingy in new situations, easily loses confidence				
Kind to younger children				
Often lies or cheats				
Picked on or bullied by other children				
Often volunteers to help others (parents, teachers, other children)				
Thinks things out before acting				
Steals from home, school or elsewhere		- 11 14		
Gets on better with adults than with other children		- 1		
Many fears, easily scared				
Sees tasks through to the end, good attention span				

Do you have any other comments or concerns?

		Yes- minor	Yes- definite	Yes- severe
	No	difficulties	difficulties	difficulties
If you have answered "Yes", please ans	swer the following	questions about	these difficulties	
How long have these difficulties been	present?			
	Less than a month	1-5 months	6-12 months	Over a year
• Do the difficulties upset or distress yo	our child?			
	Not at all	Only a little	Quite a lot	A great deal
Do the difficulties interfere with your	child's everyday l	ife in the followi	ing areas?	
	Not at all	Only a little	Quite a lot	A great deal
HOME LIFE				_
HOME LIFE FRIENDSHIPS				
FRIENDSHIPS				
FRIENDSHIPS CLASSROOM LEARNING LEISURE ACTIVITIES	u or the family as			
FRIENDSHIPS CLASSROOM LEARNING	Not	a whole?	Quite	A great
FRIENDSHIPS CLASSROOM LEARNING LEISURE ACTIVITIES		a whole?	Quite a lot	A great deal
FRIENDSHIPS CLASSROOM LEARNING LEISURE ACTIVITIES	Not	a whole?		

Overall, do you think that your child has difficulties in one or more of the following areas:

Strengths and Difficulties Questionnaire

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of the child's behaviour over the last six months or this school year.

Child's Name			Male/Female	
Date of Birth	Not True	Somewhat True	Certainly True	
Considerate of other people's feelings				
Restless, overactive, cannot stay still for long				
Often complains of headaches, stomach-aches or sickness				
Shares readily with other children (treats, toys, pencils etc.)				
Often has temper tantrums or hot tempers	= (0)			
Rather solitary, tends to play alone				
Generally obedient, usually does what adults request				
Many worries, often seems worried				
Helpful if someone is hurt, upset or feeling ill				
Constantly fidgeting or squirming				
Has at least one good friend	- 505			
Often fights with other children or bullies them		- III -		
Often unhappy, down-hearted or tearful		-100-		
Generally liked by other children				
Easily distracted, concentration wanders				
Nervous or clingy in new situations, easily loses confidence	- 107			
Kind to younger children				
Often argumentative with adults				
Picked on or bullied by other children				
Often volunteers to help others (parents, teachers, other children)	101			
Can stop and think things out before acting				
Can be spiteful to others				
Gets on better with adults than with other children				
Many fears, easily scared		100		
Sees tasks through to the end, good attention span				

Do you have any other comments or concerns?

	No	Yes- minor difficulties	Yes- definite difficulties	Yes- severe difficulties
If you have answered "Yes", please ans	wer the following	questions about	these difficulties	:
How long have these difficulties been	present?			
	Less than a month	1-5 months	6-12 months	Over a year
	1			
Do the difficulties upset or distress the	child?			
	Not at all	Only a little	Quite a lot	A great deal
Do the difficulties interfere with the cl	Not	Only a	g areas? Quite a lot	A great
Do the difficulties interfere with the cl PEER RELATIONSHIPS		Only a	Quite	
	Not	Only a	Quite	
PEER RELATIONSHIPS CLASSROOM LEARNING	Not at all	Only a little	Quite	
PEER RELATIONSHIPS CLASSROOM LEARNING	Not at all	Only a little	Quite a lot	
PEER RELATIONSHIPS CLASSROOM LEARNING	Not at all	Only a little	Quite a lot	deal
	Not at all	Only a little	Quite a lot	deal

Overall, do you think that this child has difficulties in one or more of the following areas:

Thank you very much for your help

Strengths and Difficulties Questionnaire

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of the child's behaviour over the last six months or this school year.

Child's Name			Male/Female	
Date of Birth	Not True	Somewhat True	Certainly True	
Considerate of other people's feelings				
Restless, overactive, cannot stay still for long				
Often complains of headaches, stomach-aches or sickness				
Shares readily with other children (treats, toys, pencils etc.)				
Often has temper tantrums or hot tempers				
Rather solitary, tends to play alone				
Generally obedient, usually does what adults request	1			
Many worries, often seems worried				
Helpful if someone is hurt, upset or feeling ill				
Constantly fidgeting or squirming				
Has at least one good friend				
Often fights with other children or bullies them				
Often unhappy, down-hearted or tearful		100		
Generally liked by other children		- 10-		
Easily distracted, concentration wanders				
Nervous or clingy in new situations, easily loses confidence				
Kind to younger children				
Often lies or cheats				
Picked on or bullied by other children				
Often volunteers to help others (parents, teachers, other children)				
Thinks things out before acting				
Steals from home, school or elsewhere		- 11		
Gets on better with adults than with other children				
Many fears, easily scared				
Sees tasks through to the end, good attention span				

Do you have any other comments or concerns?

emotions, concentration, behaviour or be	ing able to get or	n with other peop	ole?	
	No	Yes- minor difficulties	Yes- definite difficulties	Yes- severe difficulties
If you have answered "Yes", please answ	ver the following	questions about	these difficulties	:
How long have these difficulties been j	present?			
	Less than a month	1-5 months	6-12 months	Over a year
Do the difficulties upset or distress the	child?			
	Not at all	Only a little	Quite a lot	A great deal
	Not at all	Only a little	Quite a lot	A great deal
PEER RELATIONSHIPS	П			
CLASSROOM LEARNING				
 Do the difficulties put a burden on you 	or the class as a	whole?		
	Not at all	Only a little	Quite a lot	A great deal
Signature		Date		
Class Teacher/Form Tutor/Head of Year/	Other (please spe	ecify:)		

Overall, do you think that this child has difficulties in one or more of the following areas:

Thank you very much for your help

Strengths and Difficulties Questionnaire

For each item, please mark the box for Not True, Somewhat True or Certainly True. It would help us if you answered all items as best you can even if you are not absolutely certain or the item seems daft! Please give your answers on the basis of how things have been for you over the last six months.

Your Name			Male/Female	
Date of Birth	Not True	Somewhat True	Certainly True	
I try to be nice to other people. I care about their feelings			E	
I am restless, I cannot stay still for long				
I get a lot of headaches, stomach-aches or sickness				
I usually share with others (food, games, pens etc.)				
I get very angry and often lose my temper				
I am usually on my own. I generally play alone or keep to myself	44.1	- 5		
I usually do as I am told				
I worry a lot		= 150		
I am helpful if someone is hurt, upset or feeling ill				
I am constantly fidgeting or squirming		t		
I have one good friend or more		- 0		
I fight a lot. I can make other people do what I want				
I am often unhappy, down-hearted or tearful		_ 0		
Other people my age generally like me	- 1	- 0		
I am easily distracted, I find it difficult to concentrate				
I am nervous in new situations. I easily lose confidence				
I am kind to younger children				
I am often accused of lying or cheating				
Other children or young people pick on me or bully me				
I often volunteer to help others (parents, teachers, children)	1.0			
I think before I do things				
I take things that are not mine from home, school or elsewhere				
I get on better with adults than with people my own age				
I have many fears, I am easily scared	I 4 4			
I finish the work I'm doing. My attention is good		- 5		

Do you have any other comments or concerns?

Overall, do you think that you have diffic emotions, concentration, behaviour or bei				
	No	Yes- minor difficulties	Yes- definite difficulties	Yes- severe difficulties
If you have answered "Yes", please answ	ver the following	questions about	these difficulties	
How long have these difficulties been p	present?			
	Less than a month	1-5 months	6-12 months	Over a year
Do the difficulties upset or distress your	?			
	Not at all	Only a little	Quite a lot	A great deal
Do the difficulties interfere with your e	veryday life in t	he following area	s?	
	Not at all	Only a little	Quite a lot	A great deal
HOME LIFE				
FRIENDSHIPS				
CLASSROOM LEARNING				
LEISURE ACTIVITIES				
Do the difficulties make it harder for th	ose around you	(family, friends,	teachers, etc.)?	
	Not at all	Only a little	Quite a lot	A great deal
Your Signature				
Today's Date				

Scoring the Informant-Rated Strengths and Difficulties Questionnaire

The 25 items in the SDQ comprise 5 scales of 5 items each. It is usually easiest to score all 5 scales first before working out the total difficulties score. Somewhat True is always scored as 1, but the scoring of Not True and Certainly True varies with the item, as shown below scale by scale. For each of the 5 scales the score can range from 0 to 10 if all 5 items were completed. Scale score can be prorated if at least 3 items were completed.

Emotional Symptoms Scale	Not True	Somewhat True	Certainly True
Often complains of headaches, stomach-aches	0	1	2
Many worries, often seems worried	0	1	2
Often unhappy, downhearted or tearful	Ö	-1	2
Nervous or clingy in new situations	0	1	2
Many fears, easily scared	0	1	2
Conduct Problems Scale	Not True	Somewhat True	Certainly True
Often has temper tantrums or hot tempers	0	1	2
Generally obedient, usually does what	2	1	0
Often fights with other children or bullies them	0	1	2
Often lies or cheats	O-	1	2
Steals from home, school or elsewhere	0	Ť	2
Hyperactivity Scale	Not True	Somewhat True	Certainly True
Restless, overactive, cannot stay still for long	0	1	2
Constantly fidgeting or squirming	0	1	2
Easily distracted, concentration wanders	0	1	2
Thinks things out before acting	2	I	0
Sees tasks through to the end, good attention span	2	-1	0
Peer Problems Scale	Not True	Somewhat True	Certainly True
Rather solitary, tends to play alone	0	1	2
Has at least one good friend	2	1	0
Generally liked by other children	2	1	0
Picked on or bullied by other children	0	-1	2
Gets on better with adults than with other children	0	1	2
Prosocial Scale	Not True	Somewhat True	Certainly True
Considerate of other people's feelings	0	1	2
Shares readily with other children	0	1	2
Helpful if someone is hurt, upset of feeling ill	0	T	2
Kind to younger children	0	I.	2
Often volunteers to help others	0	1	2

The Total Difficulties Score:

is generated by summing the scores from all the scales except the prosocial scale. The resultant score can range from 0 to 40 (and is counted as missing if one of the component scores is missing).

Interpreting Symptom Scores and Defining "Caseness" from Symptom Scores

Although SDQ scores can often be used as continuous variables, it is sometimes convenient to classify scores as normal, borderline and abnormal. Using the bandings shown below, an abnormal score on one or both of the total difficulties scores can be used to identify likely "cases" with mental health disorders. This is clearly only a rough-and ready method for detecting disorders – combining information from SDQ symptom and impact scores from multiple informants is better, but still far from perfect. Approximately 10% of a community sample scores in the abnormal band on any given score, with a further 10% scoring in the borderline band. The exact proportions vary according to country, age and gender – normative SDQ data are available from the web site. You may want to adjust banding and caseness criteria for these characteristics, setting the threshold higher when avoiding false positives is of paramount importance, and setting the threshold lower when avoiding false negatives is more important.

	Normal	Borderline	Abnormal	
Parent Completed				
Total Difficulties Score	0 - 13	14-16	17 - 40	
Emotional Symptoms Score	0-3	4	5 - 10	
Conduct Problems Score	0 - 2	3	4 - 10	
Hyperactivity Score	0 - 5	6	7 - 10	
Peer Problems Score	0 - 2	3	4 - 10	
Prosocial Behaviour Score	6 - 10	5	0 - 4	
Teacher Completed				
Total Difficulties Score	0 - 11	12 - 15	16 - 40	
Emotional Symptoms Score	0 - 4	5	6 - 10	
Conduct Problems Score	0-2	3	4 - 10	
Hyperactivity Score	0-5	6	7 - 10	
Peer Problems Score	0 - 3	4	5 - 10	
Prosocial Behaviour Score	6 - 10	-5	0-4	

Generating and Interpreting Impact Scores

When using a version of the SDQ that includes an "Impact Supplement", the items on overall distress and social impairment can be summed to generate an impact score that ranges from 0 to 10 for the parent-completed version and from 0-6 for the teacher-completed version.

	Not at all	Only a	a lot	A great deal
Parent report		0.00		
Difficulties upset or distress child	0	0	1.	2
Interfere with HOME LIFE	0	0	1	2
Interfere with FRIENDSHIPS	0	0	1	2
Interfere with CLASSROOM LEARNING	0	0	1	2
Interfere with LEISURE ACTIVITIES	0	0	1	2
Teacher report				
Difficulties upset or distress child	0	0	Ţ	2
Interfere with PEER RELATIONSHIPS	0	0	1	2
Interfere with CLASSROOM LEARNING	0	0	1	2

Responses to the questions on chronicity and burden to others are not included in the impact score. When respondents have answered "no" to the first question on the impact supplement (i.e. when they do not perceive the child as having any emotional or behavioural difficulties), they are not asked to complete the questions on resultant distress or impairment; the impact score is automatically scored zero in these circumstances.

Although the impact scores can be used as continuous variables, it is sometimes convenient to classify them as normal, borderline or abnormal: a total impact score of 2 or more is abnormal; a score of 1 is borderline; and a score of 0 is normal.

Scoring the Self-Report Strengths and Difficulties Questionnaire

The 25 items in the SDQ comprise 5 scales of 5 items each. It is usually easiest to score all 5 scales first before working out the total difficulties score. Somewhat True is always scored as 1, but the scoring of Not True and Certainly True varies with the item, as shown below scale by scale. For each of the 5 scales the score can range from 0 to 10 if all 5 items were completed. Scale score can be prorated if at least 3 items were completed.

Emotional Symptoms Scale	Not True	Somewhat True	Certainly True
I get a lot of headaches, stomach-aches or sickness	0	1	2
I worry a lot	0	1	2
I am often unhappy, downhearted or tearful	0	1	2
I am nervous in new situations	0	1	2
I have many fears, I am easily scared	0	ľ	2
Conduct Problems Scale	Not True	Somewhat True	Certainly True
I get very angry and often lose my temper	0	1	2
I usually do as I am told	2	T	0
I fight a lot	0	1	2
I am often accused of lying or cheating	0	1	2
I take things that are not mine	0	1	2
Hyperactivity Scale	Not True	Somewhat True	Certainly True
I am restless. I cannot stay still for long	0	1	2
I am constantly fidgeting or squirming	0	1	2
I am easily distracted	0	1	2
I think before I do things	2	1	0
I finish the work I am doing	2	Ĩ	0
Peer Problems Scale	Not True	Somewhat True	Certainly True
I am usually on my own	0	Ī	2
I have one good friend or more	2	1	0
Other people my age generally like me	2	1	0
Other children or young people pick on me	0	1	2
I get on better with adults than with people my age	0	Ţ	2
Prosocial Scale	Not True	Somewhat True	Certainly True
I try to be nice to other people	0	1	2
I usually share with others	0	1	2
I am helpful if someone is hurt, upset of feeling ill	0	1	2
I am kind to younger children	0	1	2
I often volunteer to help others	0	1	2

The Total Difficulties Score:

is generated by summing the scores from all the scales except the prosocial scale. The resultant score can range from 0 to 40 (and is counted as missing if one of the component scores is missing).

Interpreting Symptom Scores and Defining "Caseness" from Symptom Scores

Although SDQ scores can often be used as continuous variables, it is sometimes convenient to classify scores as normal, borderline and abnormal. Using the bandings shown below, an abnormal score on the total difficulties score can be used to identify likely "cases" with mental health disorders. This is clearly only a rough-and ready method for detecting disorders – combining information from SDQ symptom and impact scores from multiple informants is better, but still far from perfect. Approximately 10% of a community sample scores in the abnormal band on any given score, with a further 10% scoring in the borderline band. The exact proportions vary according to country, age and gender – normative SDQ data are available from the web site. You may want to adjust banding and caseness criteria for these characteristics, setting the threshold higher when avoiding false positives is of paramount importance, and setting the threshold lower when avoiding false negatives is more important.

Self Completed

Total Difficulties Score	Normal 0 - 15	Borderline 16 - 19	Abnormal 20 - 40
Emotional Symptoms Score	0 - 5	6	7 - 10
Conduct Problems Score	0 - 3	4	5 - 10
Hyperactivity Score	0 - 5	6	7 - 10
Peer Problems Score	0 - 3	4 - 5	6 - 10
Prosocial Behaviour Score	6-10	5	0 - 4

Generating and Interpreting Impact Scores

When using a version of the SDQ that includes an "Impact Supplement", the items on overall distress and social impairment can be summed to generate an impact score that ranges from 0 to 10.

Difficulties upset or distress me	Not at all 0	Only a little 0	Quite a lot 1	A great deal 2
Interfere with HOME LIFE	0	0	1	2
Interfere with FRIENDSHIPS	Ō	0	1	2
Interfere with CLASSROOM LEARNING	0	0)	2
Interfere with LEISURE ACTIVITIES	0	0	1	2

Responses to the questions on chronicity and burden to others are not included in the impact score. When respondents have answered "no" to the first question on the impact supplement (i.e. when they do not perceive themselves as having any emotional or behavioural difficulties), they are not asked to complete the questions on resultant distress or impairment; the impact score is automatically scored zero in these circumstances.

Although the impact scores can be used as continuous variables, it is sometimes convenient to classify them as normal, borderline or abnormal: a total impact score of 2 or more is abnormal; a score of 1 is borderline; and a score of 0 is normal.



Appendix 4:

Transition Plans and supporting materials



TaMHS Transition Plans – Overview

Session 1 – Feelings about transition

Pre intervention self assessment Feelings wall Feelings road Melanie's Journal activity from SEAL

Session 2 – Self organisation and management

Differences card matching activity Timetable activity Timetable quiz

Session 3 – Problem Solving

Problem solving 5 step model Problem scenarios activity Yr 7 letters activity

<u>Session 4 – Coping Strategies</u>

Learning styles activity
Timetable activity
Coping strategies pocket book
Coping strategy card activity

Session 5 – Friendship

Good / not so good friendship cards activity Friendship sheet SEAL friendship activity

Session 6 – Goals and Moving On

Goals activity
SEAL going for goals
Lifeline activity
Post intervention self assessment
Evaluation

Small Group Transition Work

Register of Attendance

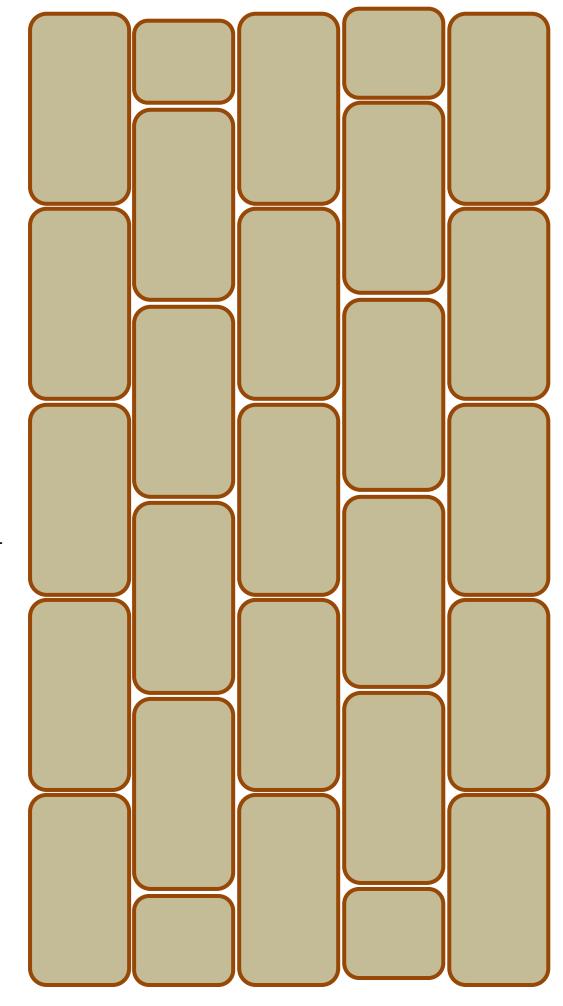
Name	Session 1 Feelings	Session 2 Self Organisation & Management	Session 3 Problem Solving	Session 4 Coping Strategies	Session 5 Friendship Skills	Session 6 Setting Goals & Moving On	Comments

Evaluation of Transition Programme

	me:			Da	ıte:		Pre	P	ost (
Ηον	w I fee	l abou	ıt leavi	ng Pri	mary	School				
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Feelings Wall

This A4 version could be used but a poster sized version would be more effective



Green set resource sheet: Year 5

Melanie's journal

January 11th

I can't believe it. How could they do this to me – Year 5, practically at secondary school and they tell me we are moving. What about my friends? My room? I've lived here since I was three. What about club? Miss Appleford? Gemma and Kaylie? What are they thinking about – I just can't stop thinking about it. I don't believe it – I can't believe it. I feel sick inside – it's just impossible to take in. How could they??????

January 28th

Mum and Dad are still going on about it but it seems to have died a bit of a death to be honest – I don't see how they could manage it with their jobs to change and everything. They say it will happen in June but I don't think their hearts are in it any more. Anyway, I'm just getting on with life – no point in telling friends if it's not going to happen anyway. Most of the time I don't think about it now – funny isn't it how you change! It seemed like the most important thing in the world a couple of weeks ago.

March 15th

You won't believe this – after weeks of not even mentioning it they're saying it's definite. NEXT WEEK – without even asking me – like I don't matter. What do they care if I have to change school and make new friends – they obviously don't care about my education. They are so, so selfish – they only care about themselves. What's worse is that we're going to Southfield and I can't even come back for weekends – Gemma and Kaylie agree with me. It shouldn't be allowed – I feel like running away.

March 24th

It is so so so much worse than I ever could have imagined. I hate the house. I hate the school. I hate the teachers. I hate the other children – they think they are soooo la-di-da – much too good to have anything to do with me. I just can't tell you how it makes me feel every day, having to go there – I hate it hate it. They all look at me like I'm an alien and no one even bothers to speak to me in the playground. I pretend I don't care and read my book, but I've already nearly got into a couple of fights and the teachers are all on their side. What a surprise. It's just not FAIR. There's a new boy – Simon – started last week but he seems to have made friends with everyone already. Mind you, he couldn't wait to get away from his old school apparently. What's wrong with me? Maybe it's just because boys play football so it's easier for them. I don't know. I miss Gemma and Kaylie so much. Yesterday I even wished my dad would lose his job or have an accident or something so we could go back to how it was.

June 15th

I've just read what I wrote in March. It's weird – I did hate it all so much then. But I sort of feel OK now. Not that it's anywhere as good as my old school, but some of the girls are OK – I was wrong to start with – when we actually talked it turned out that they had thought I was the stuck-up one! Anyway, I've got a whole stack of letters from Gemma, Kaylie – even Shanaz has written to me – it's great getting letters and guess what – in the summer I'm going to stay with Gemma for two weeks. I can't wait!!!

September 30th

Well – what a summer! Can't write now as I'm off out with Roxy (I promise I will tell you all about Roxy soon – she is such an amazing person – not a best, best friend like Gemma and Kaylie obviously but fun and stuff). I feel so lucky right now – fantastic summer with the gang, but now back to this new lot – they are great and I'm in all the sports teams – they do really proper netball here and I was always good at that. In fact my teacher says I can try for the county team! There are some things that are good about going to a bigger school. Went to visit the secondary school I might go to – it is AMAZING – you should see the DT stuff and drama suite – I can't wait to tell Kaylie – she'd love it. I wish she could move down here. That would be perfect.

Questions for discussion

- Why was Melanie upset that her parents wanted to move? How did she feel? What would she miss? What do you think you would miss if you had to move to another city?
- What do you think was difficult about starting at a new school? Why didn't she make friends very easily to start with?
- Why didn't Melanie write in her journal for a while between March and June? Had she changed or had the other children at the school changed?
- How did her feelings change from January to September?

TIME PASSING

Feelings Road

I will be in the same classroom for every lesson	I will be in a different classroom for different lessons
I will have the same class teacher for every lesson	I will have a different class teacher for different subjects
My class teacher will call the register in the morning and the afternoon	Registration will be in my form room by my form tutor
I will be with my friends in every lesson	My friends might not be in the same lessons as me
I will not have a timetable of lessons	I will have a timetable of lessons

I will pay my dinner money on Monday mornings	I will pay for my dinner in the cafeteria each day
I will know everyone in my class	I will not know everyone in each lesson – some will be from other schools
I will keep my books in my tray or drawer	I will have to carry my books round with me
My school will be quite small and I will know every room	My school will be big and I won't know every room at first
I will be one of the biggest pupils in the school	I will be one of the smallest pupils in the school

I will need shorts and T shirt for P.E.	I will need sports kits for P.E.
I might get a sticker off my teacher for good work	I might get a good report sent home for good work
I might get one lot of homework on some nights	I might get homework from more than one lesson on more than one night
My homework will have to be handed in the next day	My homework will have to be handed in at the same lesson the following week
I will know every teacher in my school	I might not know every teacher in my school

On parents evening my parents will just meet my class teacher	On parents evening my parents will meet all my subject teachers
I will be wearing the same school uniform I have worn for four years or more	I will have a new school uniform
At playtimes there will be a teacher on duty in the playground	At break times there might not be an adult on duty so I might have to go inside for help
At playtime everyone will be in the same playground	At break times there will be different areas to spend the break in
I will not need to move around school very much	I will need to move around school between each lesson

SECONDARY SCHOOL MAP AND TIMETABLE

TIMETABLE

	Mon	Lines	Wed	Thu	E
-	Food and N JAL 54	History LWE 15	Geography JLO 18	PE NLE Gym	French
7	Food and N	Maths	English	Drama	Science
	JAL 54	ELO 35	TMR 244	CSO 29	EJO 47
3	PSE	French	PE	French	Maths
	NBR 31	GMO 4	ECL Gym	GMO 4	ELO 35
4	Maths	Science	Maths	English	English
	ELO 35	EJO 42	LTA 32	TMR 24	TMR 24
က	PE	Art	Science	RE	Music
	ECL Gym	RPL 1	EJO 41	PLA 9	SDA 30
9	Science	English	French	History	Geography
	EJO 43	TMR 24	GMO 4	LWE 15	JLO 18

Timetable Quiz

Use your timetable to answer these questions....

Question	Answer
Which language will you be learning in period 1 on Friday mornings?	7 tilowoi
2. How many P.E. lessons will you have each week?	
3. Where will you have to go for P.E. in period 5 on Monday afternoon?	
4. Which lesson on Mondays covers a double period?	
5. Which teacher will you have for Maths on Wednesdays?	
6. Which room will you find your Science lesson in on Friday mornings?	
7. What initials does your RE teacher have?	
Which room will you have to find for the lesson after Maths on Wednesdays?	
9. What will you be learning about in the last period on Friday?	
10. How many days will you need to remember your P.E. kit?	
11. How many different classrooms will you have to find for Science each week?	
12. Which lesson and which room will you have come from when you get to English last period on Tuesday?	

Good luck!

Key to Teachers names:

JAL	MRS LAWSON	NBR	MR RICHARDSON	ELO	MR OWEN
EJO	MRS O'BRIEN	LWE	MR ELLIS	GMO	MRS OLIVER
ECL	MR LAWSON	RPL	MRS LINMAN	TMR	MR ROBERTS
JLO	MRS O'REILLY	LTA	MISS ALLINGHAM	NLE	MISS EDWARDS
CSO	MR OSBOURNE	PLA	MRS ANDERSON	SDA	MR ATTWOOD

Answers are at the foot of this page.

If you scored:

- 1-5 = You need to spend some time finding your way around the timetable to practice reading your new Secondary school one!
- 6 9 =You are getting good at finding your way round the timetable! That's good, but keep practising and you will get better!
- 10 − 12 = Fantastic! You will be a whizz at finding your way round! Well done!!

Five Stage Problem Solving

Sometimes when we come up against a problem, we can't see any way to solve it. When this happens, try this process. It isn't guaranteed to solve the problem but it can help you to focus on the best way forward.

- 1. Think carefully about the actual problem make sure the problem itself is clear in your mind.
- Write down as many possible solutions or ideas you can think of, even ones which you think won't work or are silly.
- 3. Decide which of these solutions are possible to use and ✓them. Discard the impossible ones with an x.
- Choose the solution you think is the best possible one.
- 5. Decide what course of action you need to take to make it happen. You might have to involve other people here. Finally, do it! ©

Congratulations on learning how to be a brilliant problem solver!

Five Stage Problem Solving

Sometimes when we come up against a problem, we can't see any way to solve it. When this happens, try this process. It isn't guaranteed to solve the problem but it can help you to focus on the best way forward.

 Think carefully about the actual problem – make sure the problem itself is clear in your mind.
 Write it here....

Write down as many possible solutions or ideas you can think of, even ones which you think won't work or are silly.

and ✓them. Discard the impossible ones with an x.
Write the possible ones here
 Choose the solution you think is the best possible one.
Explain it here
Pros
Cons

3. Decide which of these solutions are possible to use

Your homework is due in today but you realise you have forgotten to do it.

You are late for your Maths lesson and find yourself in a corridor you don't recognise.

Your form teacher tells you to get out your student planner and you realise you have left it at home on your bed.

You are in the playground with your friends and you see some older girls picking on a Year 7 girl you don't know.

You are in the locker area and you see someone stealing money from a bag you know isn't theirs.

You get to the till in the dining room queue and realise you have lost your dinner money out of your pocket.

You are in the corridor going from one lesson to another and it is crowded with people moving fast. You feel scared.

A teacher you don't know asks you a hard question which you can't answer. Everyone is looking at you for the answer.

You have caught your trousers on a nail and ripped a big hole in them.

You find someone's homework in the playground. You don't know the person whose name is on the front.

Letters from year 7 students

These letters were written by year 7 students attending the same secondary school

Letter 1

Hello! My name is Charlotte and I started School X last year.

Like most people I felt nervous and excited before I came to School X. My biggest worry was getting lost and trying to find my way around the school. But when I started I felt like I had been there for ages. For the first week, older pupils showed me to my classes (and I soon picked it up)! The teachers are really nice as well, and there are lots of activities to get involved in.

The Open Evening and Summer School really helped me understand more about School X and I also made new friends when I started in September.

I really enjoying school X and hope you will enjoy secondary school too!

Letter 2

Hello my name is Gareth. I'm in year 7 at School X, I went to Junior School Y. When I was in year 6 I was nervous and scared of all the year 11s. I was excited to try all the new sports. I like it here because I made lots of friends, there is also new classes like food, textiles and DT. I am really enjoying my time at School X, I hope you enjoy secondary school too.

Letter 3

Hello, my name is Brad I'm in year 7 at School X when I was in primary school I went to School Y.

When I went to School X I felt worried and scare about getting lost when I came I made lots of new friends and there are lots of clubs to go to like cricket, football, athletics there is also lots of new lessons like woodwork and textiles. We get to use new equipment in PE. I like it now because I have got used to it and I know where everything is. I like all of my new friends and teachers.

Letter 4

Hello, my name is Rachel. I came from Junior School Y. Last September I felt quite worried but mostly excited. School X has been a really good year for me and I have thoroughly enjoyed year 7. The teachers are really nice and so are the learning mentors who you can go to for some helpful advice.

I joined lots of clubs and teams such as; Rock Challenge. I am also part of the cricket, athletics and netball teams. When you start School X you will get shown around by a year 11 for a week.

I really enjoy all subjects but I especially enjoy art + cookery. Homework is different but not at all hard, don't be worried about detentions you only get one if you deserve it.

I keep in touch with all my friends from juniors. Year 7 was a fantastic experience for me, I am looking forward to year 8. I hope you enjoy year 7 just as much as I did.

SECONDARY SCHOOL MAP AND TIMETABLE

TIMETABLE

	Mon	Lines	Wed	Thu	E
-	Food and N JAL 54	History LWE 15	Geography JLO 18	PE NLE Gym	French
7	Food and N	Maths	English	Drama	Science
	JAL 54	ELO 35	TMR 244	CSO 29	EJO 47
3	PSE	French	PE	French	Maths
	NBR 31	GMO 4	ECL Gym	GMO 4	ELO 35
4	Maths	Science	Maths	English	English
	ELO 35	EJO 42	LTA 32	TMR 24	TMR 24
ည	PE	Art	Science	RE	Music
	ECL Gym	RPL 1	EJO 41	PLA 9	SDA 30
9	Science	English	French	History	Geography
	EJO 43	TMR 24	GMO 4	LWE 15	JLO 18

Timetable Summary Sheet

Lessons in which I might have to use a coping strategy.

How many?

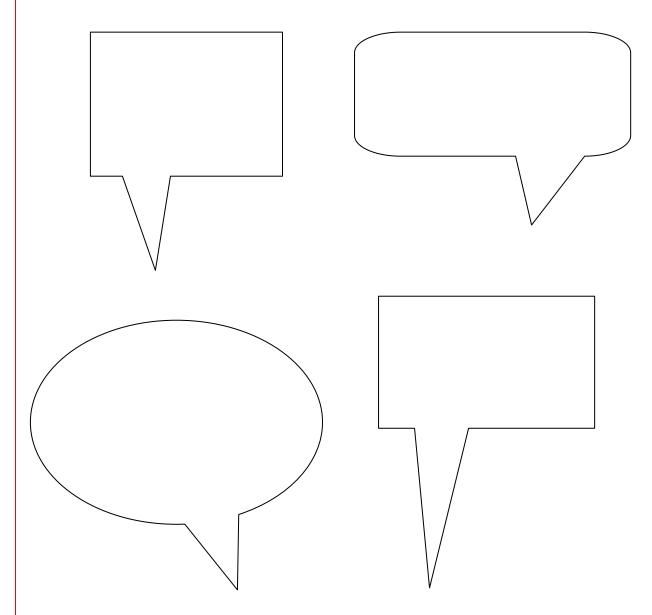
Lessons where I might have a little difficulty in coping.

How many?

Lessons in which I am confident I will be able to cope.

How many?

How many coping strategies can you think of?



To assemble the pocket prompt boo	k –
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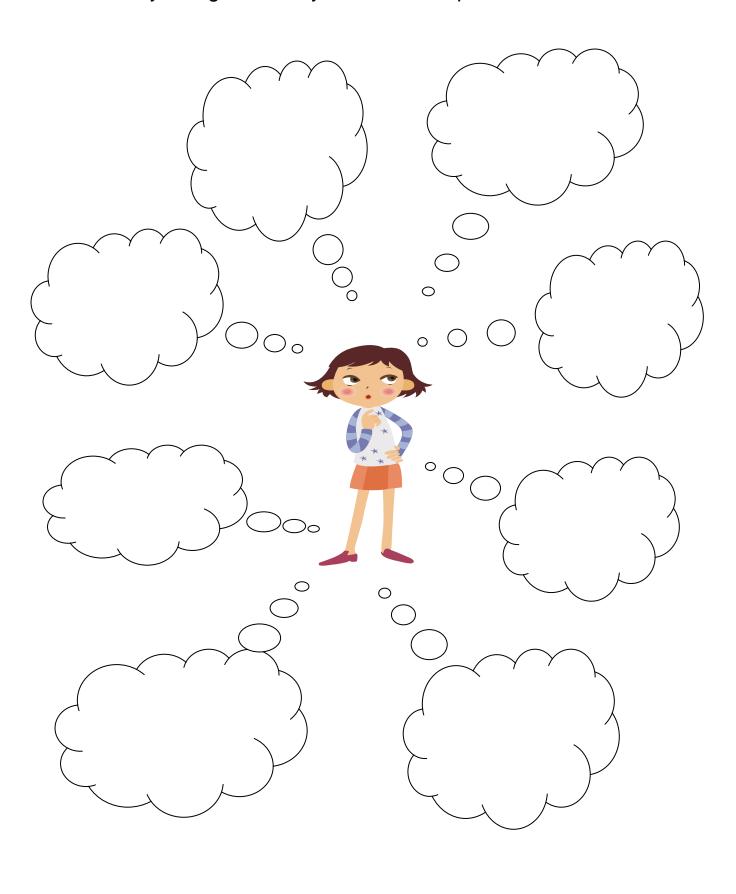
Cut out all the pages separately

Stack them in a pile with the cover on the top

Use one staple at left hand side to fasten all pages together

Coping Strategies	

My thoughts on why friends are important to me...



A good friend

A not so good friend

Tells other people not to play with you Doesn't mind when you have other friends Blames you for something he has done wrong Waits for you after school to walk home together Talks to you when you are trying to listen to the teacher Is rude to your parents Gets angry with you often Pushes you over in the rush for the dinner queue Gets you into trouble in school Gets you into trouble out of school Always wants to play games of his choice Wants you to do things you are scared to do Won't play with you when you are playing with someone else Laughs at your new trainers because they aren't a trendy make Includes you in the games he plays with other friends Invites you to join an after school club with him Calls at your house to ask you to come out Swaps his sandwiches with you if you like his best Shares his packed lunch if you have forgotten yours Offers you one of his sweets	
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Offers you one of his sweets	Shares his packed lunch if you have forgotten yours
	Offers you one of his sweets

Helps you solve your problems
Helps you tidy your bedroom so you are free to go out
Lets you go in front of him in the dinner queue when you are really hungry
Rings you when you're off school ill
Lends you his PS II games
Sticks up for you when other people aren't nice to you
Helps you with some homework you are stuck on
Listens to you when you talk
Brings you some rock back from his holidays
Shows you how to play new games
Asks you round to his house to play
Wants to be your only friend
Steals your pocket money
Makes you laugh with his jokes
Tries to cheer you up when you feel sad
Only wants you to have one friend - him or her
Calls you names
Says unkind things about you behind your back
Tells a teacher you have done something wrong when you haven't
Tells other people something you told him in confidence

Tries to make you do something you don't want to do
Wants you to go somewhere your parents don't let you go
Helps you with a job you are doing for your dad
Waits while you finish your tea before going out
Blames you for something he has done wrong
Makes fun of you in front of other friends
Respects your values and beliefs
Reminds you to hand your homework in
Reminds you to bring your P.E. kit on the right day
Lends you money for your dinner when you have lost yours
Looks after you if you feel ill
Waits for you to finish your homework before you go out to play
Makes fun of you when you have to go in at bedtime
Borrows your bike from your shed without asking
Loses his temper with you
Apologises when he has done something wrong
Helps you to understand your new timetable
Trips you up so that he beats you in a race
Invites you to his house for tea
Is nice to your sister

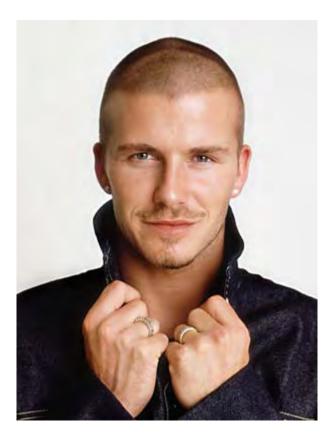
Makes fun of your sister
Congratulates you when you win a prize for good work
Refuses to talk to you when you make a new friend from another school
Falls out with you because you have a girlfriend
Falls out with you because he has a new girlfriend
Throws your bag over a high wall for a laugh
Is polite to your parents
Messes your room up and won't tidy it
Is still friendly when you haven't seen him or her for a few weeks
Pushes you in the swimming pool when he knows you can't swim yet
Lets you borrow his camera for your school trip
Doesn't like your other friends

Where Are Your Friends?

People usually have friends in different areas of their lives. Think about where your friends are..



	Choosing Friends
If I	y friends help me with different things. could choose a friend to sit next to in class, it would be because
3	tell a secret to, it would bebecause
 ⊙	sleep at my house, it would bebecause
<u></u>	get to know better, it would bebecause
<u></u>	do homework with, it would bebecause
© bed	play with after school, it would be cause
0	talk about a problem with, it would be
0	walk home from school with, it would be
0	sit with at dinner time, it would be cause
0	play a board game with, it would be cause
	ny friends were asked the best things about me, l nk they would say



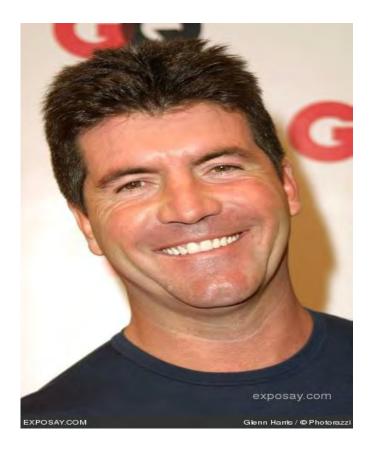
David Beckham Professional footballer - 115 England caps



Cheryl Cole Singer and TV presenter



HRH Queen Elizabeth II



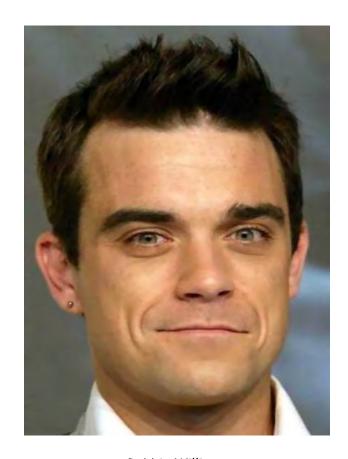
Simon Cowell Music promoter and TV personality



Miley Cyrus Actress and singer



Barrack Obama
President of the United States



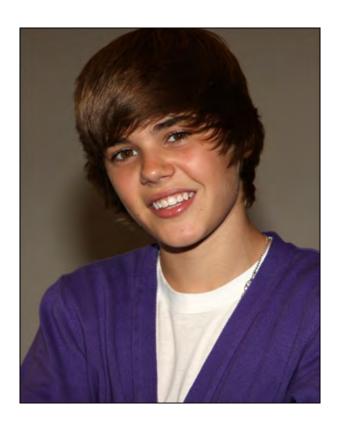
Robbie Williams Singer songwriter



Lady Ga Ga Singer songwriter



David Cameron Prime Minister



Justin Bieber Singer and actor



Mother Theresa Peace campaigner



Sir Alan Sugar Millionaire entrepreneur and TV personality



And & Dec TV presenters



JK Rowling Author



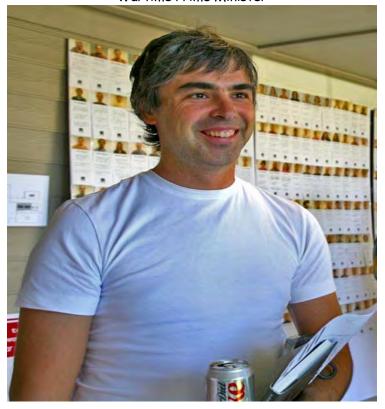
Peter Kay Comedian



Dame Tanni Grey -Thompson DBE Winner of 11 paralympic gold medals



Winston Churchill Wartime Prime Minister



Larry Page Inventor of Google search engine



Jane Tomlinson
English athlete who raised millions of pounds for cancer before losing her life to the disease



What would you like to do?





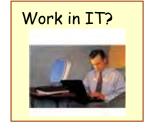














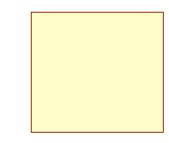






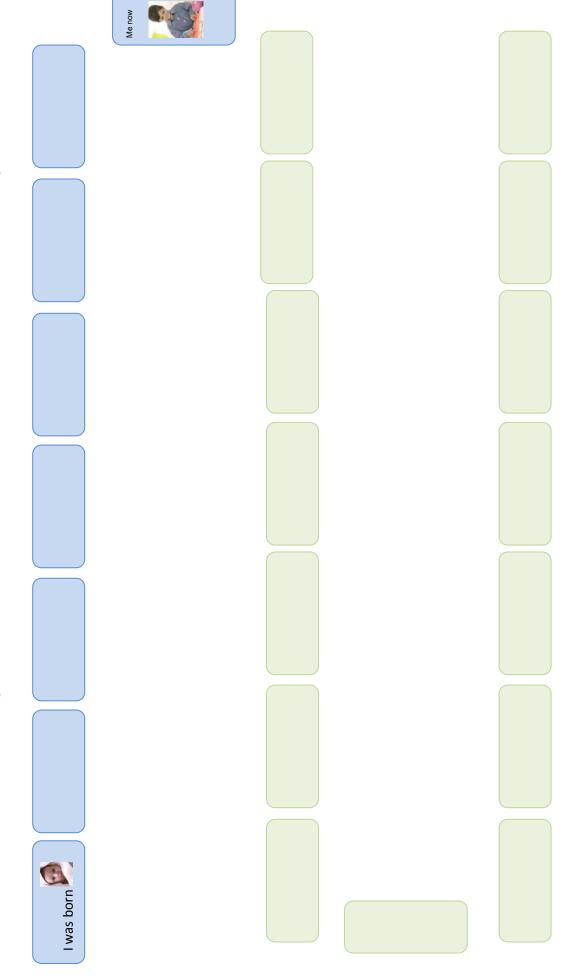






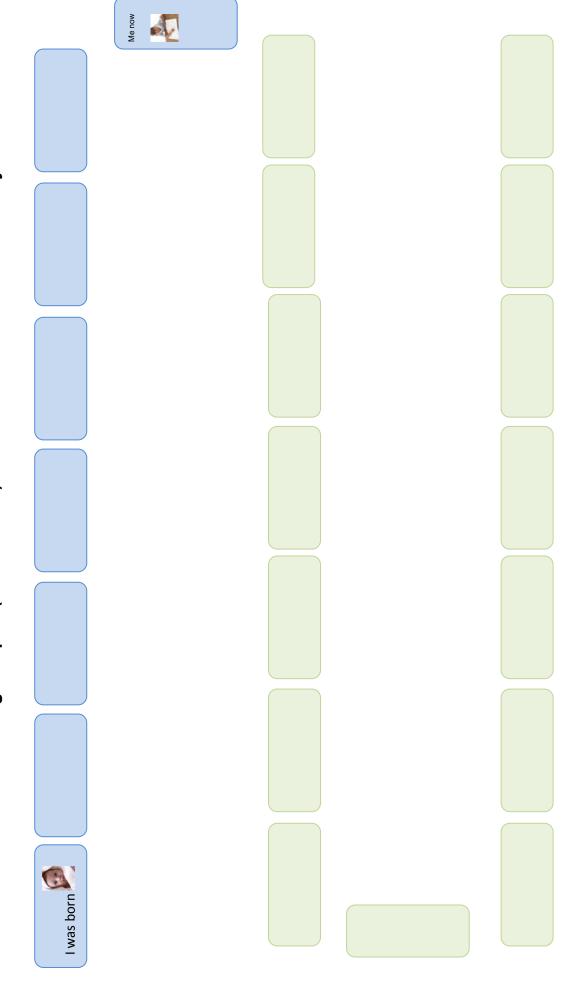
My Life Line

Follow the life line and add your memories to the blue part (before now). Then add your aspirations to the green part (from now on). Some milestones are marked for you.



My Life Line

Follow the life line and add your memories to the blue part (before now). Then add your aspirations to the green part (from now on). Some milestones are marked for you.



Who Do I Admire?

Working in pairs, each choose a famous person or someone you admire. It could be a celebrity, a sports personality or someone you know. Use the photos to help if you are stuck.

Now take turns asking each other these questions to share what you think of the person you chose:

- 1. What has the person achieved?
- 2. Why do you respect this person for their achievements?
- 3. What obstacles do you think might have got in this person's way to success?
- 4. How did she/he overcome these obstacles?
- 5. What do you think he/she said or did when they felt like giving up?
- 6. Which achievement of this person would you like to achieve too?
- 7. Think of three things you might have to do to achieve this goal.

