MENTAL HEALTH AND BEHAVIOUR IN SCHOOLS

Implementing the DfE advice,
a nurture approach

nurtureuk

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INTRODUCTION

In November 2018 the Department for Education in England (DfE) published its advice document *Mental health and behaviour in schools*.[1] This guidance for English schools is just as relevant in other parts of the UK and in other countries because it directly confronts one of the most pressing issues in education today.

As evidence from the Boxall Childhood Project (BCP)[2] clearly shows, the social, emotional mental health (SEMH) and behavioural difficulties that children and young people are experiencing has reached epidemic proportions. From the 6,800 pupils who were assessed from the primary schools that took part in the Boxall Childhood Project, the evidence shows 10% of pupils are presenting with high levels of SEMH needs, and 26% with moderate needs.

Boys in primary schools are three times more likely to experience high levels of SEMH needs. It is small wonder that teachers are experiencing what they sometimes describe as a 'tsunami' of mental health needs in the classroom.

The challenging behaviour this mental health tsunami produces has resulted in rocketing exclusion rates that have in turn been cited as a principle driver of anti-social behaviour, leading to violent crime, and in particular – knife crime.

The need to address these issues has never been more pressing, and implementing the advice in the *Mental health and behaviour in schools* White Paper can have a significant impact as the evidence shows. In this publication we look at how this guidance can be effectively implemented in the school setting and the benefits not just for the children, young people and schools, but also for society as a whole.

1. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/755135/Mental_health_and_behaviour_in_schools__.pdf
2. www.nurtureuk.org/research-evidence/boxall-childhood-project

SUMMARY OF THE MENTAL HEALTH AND BEHAVIOUR IN SCHOOLS ADVICE

Although the guidance is non-statutory, it is clear that this paper represents the DfE's preferred route to tackling the mental health and behaviour conundrum, coming down firmly on the need for a whole-school approach and effective assessment of pupils' needs, particularly in response to SEMH needs. The Department's advice covered four main topic areas and described them as:

- Sets out schools' roles and responsibilities in relation to mental health and behaviour, within their existing duties;
- Outlines how schools can identify whether a child or young person's behaviour – disruptive, withdrawn, anxious, depressed or otherwise – may be related to a mental health problem, and how to support them in these circumstances;
- Provides advice and guidance on working with other professionals and external agencies where appropriate; and
- Provides links to additional support available to schools, including frameworks, audit tools, evidence and resources.

The advice sits alongside the DfE's other non-statutory guidance such as *Behaviour and Discipline in Schools*[3] and elements of the statutory Special Educational Needs and Disabilities (SEND) Code of Practice.[4] It is intended to be relevant to all staff working to support children and young people in all school settings including those identified by the guidance as 'school leadership, governing bodies, primary and secondary school teachers, pastoral leaders, Special Educational Needs Co-ordinators, mental health leads, designated safeguarding leads, and designated teachers for looked after children'.

3. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/488034/Behaviour_and_Discipline_in_Schools_-_A_guide_for_headteachers_and_School_Staff.pdf
4. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf

SCHOOLS' MENTAL HEALTH RESPONSIBILITIES

In today's world schools are in the front line for the support of children and young people with mental health difficulties, and the high prevalence of SEMH needs in pupils is evidenced as a barrier to engagement in learning, disadvantaging still further those who are already at risk of marginalisation and exclusion, both educationally and socially.

Schools are ideally placed to identify needs early and provide appropriate interventions and effective solutions that can be crucial in promoting better mental health and wellbeing but only if there is an effective methodology in assessing the needs.

The *Mental health and behaviour in schools* advice summarises the school's role as:

- **PREVENTION:**
  creating a safe and calm environment where mental health problems are less likely, improving the mental health and wellbeing of the whole school population, and equipping pupils to be resilient so that they can manage the normal stress of life effectively. This will include teaching pupils about mental wellbeing through the curriculum and reinforcing this teaching through school activities and ethos;
- **IDENTIFICATION:**
  recognising emerging issues as early and accurately as possible;
- **EARLY SUPPORT:**
  helping pupils to access evidence based early support and interventions; and
- **ACCESS TO SPECIALIST SUPPORT:**
  working effectively with external agencies to provide swift access or referrals to specialist support and treatment.

Assessment should be undertaken by those who know the child or young person best, usually the classroom teacher or teaching support staff, so the task of assessing needs to be quick, easy and accurate. Schools, already under pressure financially, will be looking for solutions that won't exacerbate their budget constraints while trying to balance improvements in the wellbeing of their pupils (with the subsequent reduction in absenteeism, behavioural challenges, reduced exclusions and improved academic outcomes) with additional pressures on staff time and wellbeing.

THE WHOLE-SCHOOL APPROACH

The way a school approaches the challenges of mental health, wellbeing, behaviour and support for pupils and staff depends on the culture, ethos and leadership of the school from SLT and Governors. A school where the environment is chaotic, hostile, unstructured and/or unpredictable can lead to excessive levels of stress for all the school stakeholders. When developing the National Nurturing Schools Programme, nurture**uk** identified that, although schools are uniquely positioned to promote positive mental health and resilience for both pupils and staff, the influence of the school leadership is of paramount importance, and evidence from the Boxall Childhood Project showed that without the wholehearted support of the head teacher (or equivalent) efforts of staff to improve mental health as a driver for behavioural change and improvement faltered.

The DfE advice identifies three distinct advantages of adopting an integrated whole-school approach, one that "goes beyond the teaching in the classroom to pervade all aspects of school life, including:"

- **CULTURE, ETHOS AND ENVIRONMENT:** the health and wellbeing of pupils and staff is promoted through the 'hidden' or 'informal' curriculum, including leadership practice, the school's policies, values and attitudes, together with the social and physical environment;
- **TEACHING:** using the curriculum to develop pupils' knowledge about health and wellbeing; and
- **PARTNERSHIPS WITH FAMILIES AND THE COMMUNITY:** proactive engagement with families, outside agencies, and the wider community to promote consistent support for children's health and wellbeing.

For a whole-school approach to be successful it needs to be founded in the vision and values of the school together with clear expectations of behaviour for the whole school community. Clarity around policies and procedures, rewards and sanctions, and the communications needed to ensure that expectations are clearly visible to all, are essential elements to embedding the whole-school drive to improved mental health and behaviour. When implementing the *National Nurturing Schools Programme®* for example,

the *Six Principles of Nurture* are used as a bedrock for developing appropriate behaviour and communications, and the programme recommends the principles are clearly displayed throughout the school. Variations of the principles such as those developed by pupils and parents with accessible language and imagery add to the inclusive nature of the vision.

The approach will need to clearly reference existing school policies (updated where necessary) such as bullying, but importantly will also need to focus on the positive aspects of promoting positive mental health and wellbeing. Strategies designed to help and support pupils who might be experiencing high levels of stress from pressures both within and without the school environment need to be designed to scaffold around the vulnerable at risk of developing mental health problems. Early identification of these risks using assessments such as the Boxall Profile Online (**www.boxallprofile.org**) is key in improving situations.

IDENTIFYING POSSIBLE MENTAL HEALTH PROBLEMS IN CHILDREN

It is important to remember that diagnosis of clinical mental health problems in children and young people should always be the responsibility of health professionals and schools should work closely with other professionals to have the range of services and supports that can be put in place depending on the need.

It is widely known that negative experiences and life events bring about changes in children and young people's mental health, reflected in changes in behaviour or emotional state and can be displayed in a range of ways. One of the Six Principles of Nurture is *All behaviour is communication* and clearly this principle signposts potential underlying problems.

The DfE advice points out that when a school suspects a child is, or may be, having mental health problems immediate action should be taken using the graduated Assess-Plan-Do-Review response process. The guidance further identifies this as:

- an assessment to establish a clear analysis of the pupil's needs;
- a plan to set out how the pupil will be supported;
- action to provide that support; and
- regular reviews to assess the effectiveness of the provision and lead to changes where necessary.

It goes on to point out that tools such as the Boxall Profile (**www.boxallprofile.org**) can support schools through the process. Not only will this assessment inform whether specialist outside support should be sought, but that it can also provide a measure of whether any initial intervention is working or if something else needs to be tried by tracking response and progress.

GRADUATED APPROACH

There are a number of guides available to the Graduated Approach, one can be accessed from the NASEN website[5] or SecEd website.[6]

5. www.nasen.org.uk/utilities/download.F11A6869-BE1E-41B6-9A936F5FECDC985A.html
6. www.sec-ed.co.uk/best-practice/assess-plan-do-review-the-graduated-approach-to-sen/

EXCLUSIONS

There is widespread concern at the level of exclusions. Often linked to the rise in mental health and behavioural difficulties, the impact of exclusions on vulnerable pupils can be catastrophic. Almost half of all exclusions – either permanent or fixed period – are pupils identified as having special educational needs or difficulties (SEND), and children with SEND are seven times more likely than the average to be permanently excluded.

Special educational needs covers a wide range of difficulties and disabilities, all or any of which make learning harder for these children than for other pupils of a similar age.

By far the most common reason given for permanently expelling a child is 'persistent disruptive behaviour' often the behavioural expression of children with SEND and/or SEMH. This is evidenced in the nurture**uk** published research *Now You See Us* so the link between SEMH, SEND and the principal reasons for pupil exclusions is clear.

The 2019 Timpson Review of exclusions in English schools[7] identified the scale of the problems facing children and young people with SEMH and SEND and exclusion from school. And while supporting the rights of headteachers to use exclusion or expulsion as an ultimate sanction, there was clear disquiet at some practices including the removal of children from education to improve a school's league table positioning in regard to exam results – off-rolling. The review went on to recommend nurture groups:

'A particular intervention highlighted to this review by primary and secondary schools was nurture groups. These are in-school, teacher-led focused interventions for small groups of children who have particular social, emotional and behavioural needs. They support children who have not had strong early nurturing experiences, by providing a safe and structured environment where children are encouraged to develop positive and trusting relationships with both teachers and other pupils.

'Done well, as I have seen during this review, they can be an effective approach in reducing children's social, emotional and behavioural difficulties while strengthening their academic performance.'

And

'DfE should establish a Practice Improvement Fund of sufficient value, longevity and reach to support local authorities, mainstream, special and alternative provision (AP) schools to work together to establish effective systems to identify children in need of support and deliver good interventions for them. The fund should support effective partnership working to commission and fund AP and enable schools to create positive environments, target support effectively and provide the opportunity to share their best practice successfully. This should include developing best practice on areas including:

- internal inclusion units
- effective use of nurture groups and programmes
- transition support at both standard and nonstandard transition points and across all ages
- approaches to engaging parents and carers
- creating inclusive environments, especially for children from ethnic groups with higher rates of exclusion
- proactive use of AP as an early intervention delivered in mainstream schools and through off-site placements'

7. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/799979/Timpson_review_of_school_exclusion.pdf

MENTAL HEALTH AND SPECIAL NEEDS

The DfE guidance is not unique in advocating early intervention to address underlying causes of disruptive behaviour and it points out that early identification of any SEND or SEMH difficulties a child has will inform the nature and level of support a child will need. However, early assessments of all children will also identify difficulties that may not be presenting themselves in disruptive behaviour, such as the withdrawn child, and the effective use of assessments such as the Boxall Profile® by those in school who know the child best, commonly the classroom teacher, will help prevent difficulties or problems surfacing at a later date.

It is worth restating that clinical diagnosis of mental health conditions remains the responsibility of healthcare professionals and in undertaking assessments where significant mental health issues are suspected the assistance of appropriately qualified professionals as part of a multi-agency approach should be sought.

A school's special educational needs co-ordinator (SENCO) will ensure that all adults working in a school will be aware of and understand their responsibilities in respect of children with SEND and this should be extended to SEMH whereby pupils who may experience longer term mental health difficulties could mean they meet the criteria for special educational needs provision. In the event of whole-school assessment of pupils using the Boxall Profile® the SENCO will be a valuable asset in assisting interpretation and implementation of support strategies and interventions. Training for all teaching staff in how to carry out Boxall Profile® assessments to Boxall Profile® Certificate of Competency level should be supplemented by SENCOs achieving Boxall Profile® Accredited Trainer Certificate or above, all available from nurture**uk** at **www.nurtureuk.org**

The guidance also points out that many schools will be in a position to commission individual support and health services for pupils giving increased options and flexibility in identification and early response. However, the guidance also makes clear that:

'It is important that schools commission appropriately qualified and experienced external providers, as this will provide assurance they are properly trained, supported, professionally supervised, insured and working within agreed policy frameworks and standards.'

ALTERNATIVE PROVISION (AP)

There has been much debate about the level and standards of alternative provision (AP) and it is true to say that the quality of support varies wildly in different parts of the country. Local authorities are responsible for arranging AP facilities for pupils who are permanently excluded, those with SEMH or other difficulties that means they cannot access mainstream educational provision.

Again, suitable assessment of the child's needs will determine the appropriate provision requirement and this may come from a school's need to improve behaviour and/or referrals from the NHS in response to a child's mental or physical health needs.

Evidence has shown[8] that nurture has a vital role to play in working with pupils while still in school, and in particular the effectiveness of nurture groups in significantly improving the behaviour of some of the most challenging of pupils. The Queen's University Belfast evaluation showed that effective nurture intervention leads to more pupils remaining in their schools, improving behaviour and achieving significant increases in academic outcomes, notably numeracy and literacy, thus reducing the pressure on the AP system.

Where AP is seen as the only option (for example where a school doesn't have the capacity or resources for an onsite intervention), schools and AP should work together to plan for reintegration of the pupil to mainstream education wherever possible. The child's progress should be shared between the AP and the school (the Boxall Profile scores for example), with a report on the efficacy of the interventions and support used in the AP that can be adopted or adapted by the school post-reintegration. Where pupils have SEND these plans should also link with Education, Health and Care Plan.

8. www.education-ni.gov.uk/sites/default/files/publications/education/162037_QUB%20Nurture%20Evaluation%20Exec%20Summary%20-%20new.pdf

EFFECTIVE WHOLE-SCHOOL APPROACHES

Understanding the SEMH needs of pupils is absolutely essential in developing a whole-school approach to improving mental health and behaviour in schools. As cited in the DfE advice the Boxall Profile Online tool (www.boxallprofile.org) is an ideal method for undertaking this screening. In the *Now You See Us* report from nurture**uk** schools were challenged to undertake this screening with the support of training from qualified nurture**uk** staff and access to consultancy support for interpretation and assessment evaluation. The results are startling.

The overall evaluation of the Boxall Childhood Project concluded that a whole-school approach to assessing children's SEMH was valuable and effective in primary schools. The evaluation indicated that:

- A whole-school approach to assessing children's SEMH was feasible in mainstream primary schools settings. More than 60% of schools were able to train all their teaching staff and assess all their pupils, at least once over the course of the project.
- Although the initial plan was for Boxall Childhood Project schools to assess all pupils once per term, the majority of settings struggled to follow this schedule (only 23% of primary schools assessed all their pupils four times). However, schools found it valuable to assess all children at least twice per academic year: once during the autumn term and six months later before the Easter break (see full report for more detail).
- Data collected eight months following the end of the project also provided preliminary findings that the approach was sustainable to some extent, but that perhaps schools needed further external support to carry the approach forward.
- The data gathered over the course of the project provided strong evidence that the approach was effective and could trigger a large number of positive outcomes for children, teaching staff and across the whole school, if the school leadership was committed to identifying and supporting the needs of children. Importantly, it was observed that the SEMH needs and wellbeing of children improved significantly over the course of the academic year, as a direct result of schools identifying and responding to the needs.
- The majority of schools found the approach very valuable, with 92% of primary schools that successfully assessed all their pupils saying they would recommend other settings to implement the approach. The evaluation also provided guidance regarding the areas of the approach that could be improved. In particular, nurture**uk** should provide additional resources and guidance to ensure pastoral staff and teaching staff are able to answer the SEMH needs of children effectively (eg planning adequate individual and whole-class support adapted to the SEMH needs identified). The charity should also invest in developing further the analytical capabilities of the Boxall Profile Online® to increase the potential impact of the data.

WHERE NEXT?

Nurture**uk** is committed to ensuring that all pupils have access to an inclusive and nurturing education and believes that the Boxall Profile® is the single most effective way to achieve the understanding of pupil's SEMH needs on a whole-school basis. Coupled with the ability of the Boxall Profile® to track pupils' progress and the effectiveness of interventions, and the additional support nurture**uk** can provide in terms of training, whole-class strategies etc the goal of a whole-school approach is now within reach.

Boxall is also low-cost with subscriptions from just £195 per year for smaller schools and settings including unlimited use. With effect from November 2019 nurtureuk is introducing a new team of Accredited Boxall Trainers, the only team qualified to provide school staff with the Certificate of Boxall Competence as the baseline entry into SEMH understanding. Together with the nurtureuk national consultancy team, the charity now provides the most comprehensive support available nationwide.

For more information contact the nurture**uk** Boxall Profile Team on
020 3475 8980 or email **hello@boxallprofile.org**

ABOUT NURTUREUK

Nurture**uk** is a registered charity working tirelessly to promote access to education for all. With rising levels of mental health problems and increasing numbers of children and young people affected by social, emotional and behavioural difficulties that inhibit their progress and limit their life chances, nurture**uk** is at the forefront of combatting barriers to learning and development.

Our charity has developed a range of evidence-based interventions and support, delivered in schools and other educational settings, that give disadvantaged and vulnerable children and young people the opportunity to be the best they can be.

Whether it is delivering certified training for professionals, supporting whole-school nurturing approaches, providing accurate assessments of need, or promoting rigorous research-based evidence, nurture**uk** is providing the quality support and resources that make impactful, nurturing, education provisions a reality for children and young people throughout the UK and beyond.

Visit our website for more information about nurture**uk**

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