

The Whole School Approach Wellbeing Mapping Tool

Striving to put wellbeing at the heart of schools and their communities



Whole School Approach Wellbeing Mapping Tool

The mapping tool is separated into eight areas to reflect the eight key principles that underpin an effective whole school approach to promoting positive mental health and wellbeing.

A whole school approach is a whole systems approach, and goes beyond learning and teaching in the classroom to pervade all aspects of school life including, importantly, the school's ethos and environment, and its partnerships with parents/carers and the wider community.

The process of auditing should be seen as an opportunity to reflect upon what your current provision looks like. It is important as a whole school community to firstly celebrate all you do and then to think about which of the eight principles you would like to develop further based on the self-assessment outcomes.

The purpose of the tool is to provide a framework of quality standards so that schools can ensure practices are embedded and maintained in their ethos, pedagogy and culture.

This tool can be used as part of a continuous journey so that wellbeing remains at the heart of the school community, helping to drive school improvement and change lives as a result.

Self-Assessment

The mapping tool uses a self-assessment RAG rating system:

- Red** Does not currently happen.
There is little or no evidence available regarding measure of performance or quality assurance.
- Amber** Is in place, or under development.
There is limited evidence available to back up practice.
- Green** Established, good evidence available to measure performance and quality assurance.

Contents Key

1.	Leadership and management that supports and champions efforts to promote wellbeing
2.	A school ethos and environment that champions positive mental health
3.	Curriculum teaching and learning
4.	Pupil voice
5.	Professional development and staff health and wellbeing
6.	Identifying need and monitoring impact
7.	Working with parents/carers
8.	Targeted support

1. Leadership and management

Area of focus	Standards	Red	Amber	Green
		R	A	G
There is a Designated Mental Health Lead (DMHL) who has a clear understanding of their role.	There is a shared understanding across the setting of what is meant by the whole school/setting approach to mental health and wellbeing.			
	The DMHL works collaboratively with other colleagues on this agenda, i.e., SENCO, DSL, pastoral team, PSHE lead, wellbeing governor, PE lead, designated teacher for looked after children, EYFS lead, attendance officers.			
	The DMHL has attended local and national training to support their role, e.g., DFE senior mental health lead training, local networks, mental health first aid training.			
There is a clear mental health support pathway.	There is a mental health and wellbeing policy that includes staff wellbeing. It has been developed in consultation with staff, parents/carers, children/young people (CYP) and is understood by the whole school community.			
	The DMHL/SENCO/DSL/pastoral team are aware of the mental health providers and specialist services that can support the setting, i.e., aware of the Derby and Derbyshire Mental Health Pathway Guidance document.			
	A provision map has been developed to show the graduated response of support available.			
Mental health and wellbeing priorities, goals and aims are identified.	Setting/school data as well as local/national data is used to identify need, priorities and aims, i.e., My Life My View, health profile data, attendance data, bullying incidents, what is happening in the community.			
	The setting has approaches in place to promote wellbeing, i.e., signposts to clubs/activities.			
	Areas for development are clearly referenced and communicated, i.e., action plan, school improvement plan, governors' meetings.			
There is a clear understanding of how mental health and wellbeing is part of a safeguarding curriculum.	Effective systems are in place to identify, share, report, refer and monitor mental health concerns of CYP, i.e., CPOMS, My Concern.			
	All staff are aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, racism, discrimination, bullying, neglect or exploitation.			
	The SLT promote CPD to ensure that staff are aware of some common symptoms of mental health problems: what is and isn't a cause for concern; and what to do if they think they have spotted a developing problem.			
There is a lead governor for mental health (MH) and wellbeing.	The DMHL liaises with the wellbeing governor(s), i.e., shares any training that is available, updates on priorities/ aims etc.			
	The governor(s) is/are aware of/involved in the audit/development of the whole school/setting approach to mental health and wellbeing action plan.			
	The DMHL/ SLT/wellbeing governor(s) identify/promote approaches/ systems of support for headteacher/staff wellbeing, i.e., headteacher coaching offer, supervision, Education Support charity.			

2. Ethos and environment

Area of focus	Standards	Red	Amber	Green
		R	A	G
The setting understands the importance of 'belonging' and 'safety' to support mental health and wellbeing.	The setting can give examples of effective practices that are in place that build a sense of belonging.			
	The setting creates a safe learning environment, i.e., trauma- informed/attachment aware, sensory friendly, safe spaces etc. CYP report feeling safe.			
	The setting understands the importance of managing transitions, i.e., start of the school day/lunchtimes/lessons/school/seating and has strategies/systems of support in places.			
The setting promotes the importance of asking for help and supporting others without judgement.	CYP are aware of a range of ways they can get/ask for help/support.			
	The setting promotes and models' consistent messages about the importance of looking after mental health and wellbeing across the school community.			
	The setting understands the stigma that surrounds mental health and the barriers of asking for help. The setting can describe ways they are working to reduce it.			
The setting understands the importance of developing and building positive relationships to support wellbeing.	The setting promotes the importance of being curious and approachable, reducing conflict wherever possible, i.e., relational approach.			
	The setting can share examples of how they develop/build/maintain positive relationships with pupils.			
	Settings can share examples of how they develop/build positive relationships within the setting, i.e., staff and staff, staff, and parents/families.			
The setting promotes the importance of a balanced diet and how this can impact on the way we feel.	Food education is built into the curriculum, i.e., lessons, assemblies, cooking opportunities, growing, and harvesting.			
	The setting models a positive food culture i.e., creating a positive eating environment, communication with parents/carers, drinking water is promoted and accessible throughout the school day.			
	Knowledge, and signposting to a pathway of support services is understood and shared.			
The importance of physical activity for wellbeing is modelled and promoted.	Staff responsible for physical activity and staff responsible for supporting wellbeing, i.e., the DMHL, work together.			
	Physical activity is incorporated into the curriculum to support teaching and learning and regulation, i.e., brain breaks, active/outdoor learning opportunities.			
	There are a range of activities available during lunchtimes, breaks and after school.			

3. Curriculum teaching and learning

Area of focus	Standards	Red	Amber	Green
		R	A	G
The PSHE lead/DMHL can give examples of how mental health education is delivered.	Staff have regular opportunities to evaluate the RSHE/PSHE/PD/PSED curriculum content and suggest areas for improvement/need, i.e., resources.			
	Strategies to create a safe learning environment are understood and are part of practice and provision.			
	Teachers feel confident to deliver and facilitate PSHE/PD/PSED lessons.			
	Mental health and wellbeing is taught through dedicated PSHE/PD/PSED lessons and has been integrated into the curriculum of the school/setting.			
The setting understands what they can do (on their own and working with partners) to help build resilience.	CYP get the opportunity to identify and build on their strengths/abilities.			
	The PSHE/PD/PSED programme and the wider curriculum teaches and promotes emotional literacy.			
	There is a shared understanding of how to build resilience across the curriculum.			
There is a shared understanding of what is meant by mental health and wellbeing.	The whole school community understands that everyone has mental health and physical health, and that both can impact our wellbeing.			
	The 5 Ways to Wellbeing and how this links to self-care is promoted and part of the school ethos, i.e., SMILERS.			
	The curriculum/ethos considers and incorporates strategies to support wellbeing.			
Staff training meets identified need.	Time is set aside to include all school staff in training, i.e., midday supervisors.			
	The DMHL/PSHE/PD/PSED leads who attend training cascade their learning where appropriate, so it has a greater impact.			
	Settings know what their training needs/gaps are based on consultation with staff.			
The curriculum is inclusive, it promotes respect and values diversity.	The setting can identify how the nine protected characteristics are actively promoted/understood.			
	The curriculum content includes resources which reflect/represent a diverse range of images, voices, and perspectives, i.e., avoiding stereotypes and promoting diversity.			
	Teachers receive training to support their pedagogical knowledge.			

4. Pupil voice

Area of focus	Standards	Red	Amber	Green
		R	A	G
CYP have the opportunity/support to express their views and influence decisions around wellbeing.	CYP's needs/voices are considered when planning the PSHE/PD/RSHE/PSED curriculum content, delivery and when writing wellbeing policies.			
	CYP feel valued and listened to and there are systems in place to share their feelings/ thoughts/ ideas e.g., worry and wishes boxes, school council, surveys, consultations.			
	CYP have opportunities to report how safe they feel.			
CYP know who to go to/where to go if they need to be listened to or need to ask for help.	CYP are given the opportunity to organise/be part of wellbeing events to help raise awareness within the school/ setting and community.			
	CYP report that they know who to go to/where to go if they need to be listened to or need to ask for help.			
	CYP are supported to be able to ask for help and staff are aware of barriers and work hard to challenge these.			
CYP are encouraged to work collaboratively and to care for each other.	CYP can communicate how to help and support each other in an age appropriate way.			
	CYP are involved in mental health awareness days, i.e., Children's Mental Health Week, Anti-bullying Week, Black History Month, Safer Internet Day etc.			
	CYP/staff/parents/carers are involved in identifying 'pressure points' such as exam periods/transitions and support in sharing tools and tips for self-care around this time.			

5. Staff health and wellbeing

Area of focus	Standards	Red	Amber	Green
		R	A	G
The setting promotes staff mental health and wellbeing.	The setting makes the best of environments/spaces for staff, i.e., staff room environments, staff toilets.			
	The setting encourages self-care, i.e., 5 Ways to Wellbeing, SMILERS.			
	All staff are valued, regularly acknowledged, and celebrated.			
Clear pathways to support staff wellbeing are communicated and understood by everyone.	The mental health policy includes staff wellbeing. The policy is communicated so that all staff are aware and it reflects practice.			
	A variety of support systems are promoted to ensure that whole school staff wellbeing is looked after, i.e., peer support, signposting to helplines, coaching, and supervision.			
	Universal, targeted and specialist external support pathways for staff are communicated and understood by all staff.			
The setting has systems in place to monitor staff health and wellbeing.	Staff are consulted, i.e., surveys are used to identify key issues. The setting responds to the findings and develops an action plan in consultation with governors and staff.			
	Workload is regular reviewed.			
	Mental health and wellbeing is an integral element of their professional appraisal meetings.			
The setting delivers effective mental health training to all staff.	All early career teachers (ECT's) and new staff complete an induction programme which includes MHWB .			
	All staff have opportunities to access a range of mental health awareness training to ensure skills, knowledge and a standard level of competence across the setting.			
	An audit/needs analysis is regularly carried out to identify training needs.			

6. Identifying need and monitoring impact

Area of focus	Standards	Red	Amber	Green
		R	A	G
There is a shared understanding of the systemic issues that affect mental health.	Staff can identify risk factors and protective factors in relation to mental health and wellbeing.			
	Regional, local, and setting data is accessed to analyse and identify the needs of CYP and families to help plan provision, i.e., attendance, safeguarding.			
	Staff are always curious about what might be causing the problem and reflect together on current support CYP may be receiving, i.e., bullying, emotionally based school avoidance.			
There is a shared understanding of what the graduated response is to support CYP.	CYP wellbeing is observed/assessed to help understand the range and level of need in the setting and help to plan provision, i.e., SCA, school, GP, Educational Psychologist, School Nurse, Behaviour Support, Mental Health Support Team.			
	Internal school support options are identified and always considered first.			
	The support in school, community (prosocial) at home or externally are always considered.			
There is a joined-up approach to measuring the impact and effectiveness of interventions. This then informs future planning.	Support plans are developed in partnership with CYP, family/services. The views of pupils, parents/carers, staff and relevant stakeholders are captured to inform the impact of interventions.			
	There is a whole school setting approach/ clear pathway to assessing, planning, doing, and reviewing.			
	Quality MHWB provision and resources are invested in and interventions have clear outcomes.			

7. Targeted support and intervention

Area of focus	Standards	Red	Amber	Green
		R	A	G
Identifying the right interventions for CYP.	The setting gathers information to build up an accurate picture of need, i.e., observation, early help assessment, screening tools, parent/child voice.			
	The Derby and Derbyshire Mental Health Pathway Guidance is used to help identify which support is available. All appropriate internal support is utilised prior to accessing external support.			
	CYP/families have a voice and are listened to throughout the intervention process. The CYP's story of what may have happened is heard.			
There are clear assessment and internal referral procedures to ensure timely and appropriate support is obtained and accessed.	The setting works with key partners/agencies to identify good quality appropriate mental health support, i.e., works closely with CAMHS SCA, Mental Health Support Teams.			
	Identified staff feel confident in assessment and referral procedures.			
	Staff can recognise basic warning signs that a CYP might need support and know how to report any concerns.			
The setting works collaboratively to support CYP who are receiving interventions/treatment.	There is a clear approach to how the settings engages and works with parents/carers/families.			
	The setting uses a range of interventions to support CYP who may be facing multiple and ongoing risks. They use a combination of school-based and broader external support.			
	The setting works closely with services to support CYP who are receiving interventions/treatment. They plan for ongoing support once interventions finish.			

8. Parents/carers

Area of focus	Standards	Red	Amber	Green
		R	A	G
Parents/carers know what support is available via the setting and how to access it.	Parents/carers have access to information and self-help resources/programmes for mental health and wellbeing to support CYP, i.e., signposted to the local offer, school website.			
	Parents/carers are aware of the school's mental health policy and procedures when raising concerns about their child's MHWB.			
	Parents/carers are given local/community information that supports wellbeing i.e., local food banks, holiday clubs, helplines.			
The setting offers parent/carer participation opportunities.	The setting offers/signposts to learning opportunities and recognises that all parents/carers may want to engage in different ways, i.e., induction day, drop ins, workshops, parent's evening, marketplace etc.			
	Parents/carers are given information regarding how the school provides an effective mental health and wellbeing (MHWB) programme and how to support this beyond the classroom.			
	There are effective methods of communication to ensure MHWB information is shared with all parents/carers.			
The setting's environment is a welcoming and caring place for all parents/carers.	Staff are aware of the barrier's families may face asking for support/coming into the setting and staff work creatively to support parents/carers/families.			
	Parents/carers know how they can communicate with staff and which staff member to contact. They are aware of external agencies they can self refer to.			
	A range of opportunities are provided by the setting to develop relationships with parents/carers/families.			

Wellbeing Action Plan

Intention What is our focus?	Implementation How will we achieve it?	When Timescale?	Who Named Person(s)?	Impact What difference has it made? How do we know?

Wellbeing Action Plan

What would we like to celebrate and share?

What have we learnt?

What are the next steps and when will these be achieved?

