



Inspiring Optimistic Learners

## Health and Wellbeing Policy (Mental Health & Academic and Life Resilience)

### Linked Policies/Protocols

- PSHEe Policy
- Child Protection and Safeguarding Policy
- All related policies including particularly:
- Code of Conduct (Staff)
- Behaviour Policy (Students)
- Whistleblowing Policy (Staff)

**Reviewed:** April 2019

**Next review due:** April 2020

**Governing Body Committee:** CSC

**CLT contact:** Jeremy Plumb

**Policy adopted by the Full Governing Body on: 15/05/2019**

## **Introduction**

This policy applies to all members of Torpoint Community College community. As part of our core mission and values, and continued dedication to the health and wellbeing of our students, this policy provides a clear set of protocols for dealing with any issues that may arise, surrounding mental health, the syndrome of self-injury and developing academic and health related resilience. In order to help our students succeed, we have a key role to play in supporting our young people in being resilient and mentally healthy.

There are a variety of ways at TCC that we provide support, for all of our students and for those with particular problems, these include:

- Staff Champion
- Strategies – College twice annual surveys
- Email free Fridays
- Communication
- Support and Challenge
- Health and wellbeing twilight INSET
- The Memorial Mile

## **Factors that put students at risk**

Typically, certain individuals and groups are more at risk of developing mental health problems than others. These risks can relate to the child themselves, to their family, or to their community or life events. Risk factors are cumulative. Children exposed to multiple risks such as social disadvantage, family adversity and cognitive or attention problems are much more likely to develop behavioural problems. Mental health and issues leading to self-harm/self-injury can however affect anyone during what may be a vulnerable period.

## **Factors that make children more resilient**

Seemingly against all the odds, some children exposed to significant risk factors develop into competent, confident and caring adults. An important key to promoting children's mental health is therefore an understanding of the protective factors that enable children to be resilient when they encounter problems and challenges.

The role that TCC plays in promoting the resilience of our students is important, particularly so for some children where their home life is less supportive. TCC is a safe and affirming place for children where they can develop a sense of belonging and feel able to trust and talk openly with adults about their problems.

The College invests in this area and has a team of Designated Safeguarding Officers (DSL) including the Senior DSL, which meet monthly, a Safeguarding Monitoring Group (SGMS), which meets termly and a trained Staff Wellbeing Champion. This is in addition to other staff both pastoral and academic and as a result of Headstart Funding the College has a colleague that leads on the emotional health and wellbeing of students.

The College has a Health and Wellbeing Board (HWB) made up from staff and students.

The College recognises and understands that the College plays a key role in supporting the young people on role and the staff who work in the College to be resilient and mentally healthy. TCC aims to offer support to students and staff at such times, intervening well

before social, emotional and mental health problems develop. Health and Wellbeing is paramount. The College Leadership Team, CICare Team, LADO, College Nurse and DSL's provide advice and guidance.

### **Difficult events that may have an effect on students**

Learning Mentors and class teachers see their students' on a daily basis. They know them well and are well placed to spot changes in behaviour that might indicate a problem. The balance between the risk and protective factors set out above is most likely to be disrupted when difficult events happen in student's lives. These include:

- **Loss or separation** – resulting from death, parental separation, divorce, hospitalisation, loss of friendships (especially in adolescence), family conflict or breakdown that results in the child having to live elsewhere, being taken into care or adopted;
- **Life changes** – such as the birth of a sibling, moving house or changing schools or during transition from primary to secondary school, or secondary school to sixth form; and
- **Traumatic events** such as abuse, domestic violence, bullying, violence, accidents, injuries or natural disaster.

### **The Curriculum at TCC**

It's clear that the term "curriculum" applies to much more than just the taught subject curriculum at TCC. Whether through the pastoral or academic provision, the type and style of support and challenge for students determine the ethos here. All staff and students use an intelligent response to emotional development (including wellbeing, resilience and mental health) and the strategies outlined in this policy, as well as the policy itself, indicate the high regard "health and wellbeing" have. The vast majority of staff have received training in brain development and developing their own spare emotional capacity.

### **Partnership with other agencies**

The booklet produced by the Student Support Centre identifying the partnerships at College is in Appendix 3.

The College works in partnership with Reconstruct (the preferred Cornwall LSCB agency), THRIVE and Headstart Kernow. The Child and Adolescent Mental Health Team (CAMHS) – The College draws from Thrive practitioners, counsellors including Brighter Futures, MINDed and Young Minds (national e-learning and advice web based platforms), Brooke Health and Wellbeing organisation, Kooth (face to face and online counselling) Educational Welfare Services, Social Services, Social Care and various educational psychologists from across Cornwall, Devon and Plymouth.

The College staff and Governors place great emphasis on developing a strong positive culture with the intention that all who attend the College are successful learners and effective citizens and the vast majority of staff have experience and knowledge in working with young people experiencing ESMH concerns.

Examples of high quality practice:

- The College has a Health and Wellbeing Board comprising both staff and students.
- The strong reputation the College has regarding ESMH education is growing both locally and nationally. For example, the College was invited to present to the CASH about strategies it uses to promote ESMH
- Students from the College were awarded first prize by the Headstart Board for a film that they had made, revolving around the use of digital media.
- A student from TCC chairs the Headstart Young People's Board.

## **Health and Well Being Champion**

The Health and Wellbeing Champion receives appropriate training and support, voluntarily bring their ability to relate to people and their own life experience to transform health and wellbeing in the College. They help others to enjoy healthier lives by raising awareness of health and healthy choices, sharing health messages, removing barriers and creating supportive networks and environments.

## **Identifying children with possible mental health problems**

Behavioural difficulties do not necessarily mean that a child or young person has a possible mental health problem or a special educational need (SEND). Consistent disruptive or withdrawn behaviours can, however, be an indication of an underlying problem, and where there are concerns about behaviour, there may be an assessment carried out by SSC/DSL/SENCO/HLoL/ of all of the identified factors to determine whether there are any causal factors such as undiagnosed learning difficulties, difficulties with speech and language or mental health issues.

TCC is well-placed to observe students day-to-day and identify those whose behaviour suggests that they may be suffering from a mental health problem or be at risk of developing one. This may include withdrawn students whose needs may otherwise go unrecognised. There are often two key elements that enable schools to reliably identify children at risk of mental health problems:

- **Effective use of data** so that changes in students' patterns of attainment, attendance or behaviour are noticed and can be acted upon
- **An effective 'pastoral' system** - that knows every student well and can spot where poor or unusual behaviour may have a root cause that needs addressing. Where this is the case, the pastoral system or College policies should provide the structure through which staff can escalate the issue and take decisions about what to do next.

Only medical professionals should make a formal diagnosis of a mental health condition. The DSL or nominated other will refer any students it feels may be at risk of mental health issues to Children's Services and/or advise parents to take their child to their GP or A&E where appropriate.

## **Roles and Responsibilities of All Staff**

TCC will, where appropriate, make a referral to Children's Services where it has concerns regarding a child's well-being/mental health. Staff are required to contact the LADO, MARU and in College Lead DSL directly when a young person is not safe. Staff are asked to imagine

that Safeguarding – Keeping Children Safe – is like a filing cabinet and child protection is one drawer and all staff are responsible for ensuring children are safe. All members of staff should be familiar with the following information to support the identification of potential self-harm/injury issues and the necessary steps to take where there are concerns. This applies to all staff, including Learning Mentors, Technicians and other support staff. Therefore staff will

- make records of students experiencing self-injury, incidents of self-injury and all other concerns surrounding the issue and report to DSL via the template available.
- ensure they are fully confident in their understanding of self-injury and seek additional information and / or training if they feel it necessary
- follow TCC’s safeguarding procedures (see Safeguarding Policy) and remain calm and non-judgemental should a student or adult choose to disclose information:
  - avoid dismissing a students’ reason for distress as invalid
  - encourage students to be open with them and reassure them that they can get the help they need if they are willing to talk
  - don’t make promises that they can’t keep regarding confidentiality
- in particular, in relation to self injury, staff should
  - avoid asking a student or colleague to show you their scars or describe their self-injury
  - avoid asking a student to stop self-harming (you may be removing the only coping mechanism they currently have)
  - report the matter to a designated key member of staff as soon as you become aware of the problem, and inform the student that you are doing this
- if a student discloses self-harm, report it immediately to the DSL and if possible using the agreed College process
- Be aware of communication processes with the DSL in the schools Young Minds Mental Health policy
- Remain calm and non-judgemental
- Encourage students to be open with them and reassure the student that they can get the help they need if they are willing to talk

## **Roles and responsibilities of the DSL (Designated Safeguarding Lead) & Deputies**

Governing bodies, proprietors and management committees should appoint an appropriate senior member of staff, from the school or college leadership team, to the role of Designated Safeguarding Lead. The Designated Safeguarding Lead should take lead responsibility for safeguarding and child protection. This should be explicit in the roleholder’s job description. This person should have the appropriate status and authority within the school to carry out the duties of the post. They should be given the time, funding, training, resources and support to provide advice and support to other staff on child welfare and child protection matters, to take part in strategy discussions and interagency meetings – and/or to support other staff to do so – and to contribute to the assessment of children.

### **Deputy Designated Safeguarding Leads**

It is a matter for individual schools and colleges as to whether they choose to have one or more deputy Designated Safeguarding Lead(s). Any deputies should be trained to the same standard as the Designated Safeguarding Lead. Whilst the activities of the designated

safeguarding lead can be delegated to set out above, remains with the designated safeguarding lead; this lead responsibility should not be delegated.

### Manage referrals

The designated safeguarding lead is expected to:

- refer cases of suspected abuse to the local authority children's social care as required;
- support staff who make referrals to local authority children's social care;
- refer cases to the Channel programme where there is a radicalisation concern as required;
- support staff who make referrals to the Channel programme;
- refer cases where a person is dismissed or left due to risk/harm to a child to the Disclosure and Barring Service as required; and
- refer cases where a crime may have been committed to the Police as required

### Work with others

The designated safeguarding lead is expected to:

- liaise with the headteacher or principal to inform him or her of issues especially ongoing enquiries under section 47 of the Children Act 1989 and police investigations;
- as required, liaise with the "case manager" (as per Part four) and the designated officer(s) at the local authority for child protection concerns (all cases which concern a staff member); and
- liaise with staff on matters of safety and safeguarding and when deciding whether to make a referral by liaising with relevant agencies. Act as a source of support, advice and expertise for staff.

### Training

The Designated Safeguarding Lead (and any deputies) should undergo training to provide them with the knowledge and skills required to carry out the role. This training should be updated at least every two years. The designated safeguarding lead should undertake Prevent awareness training. In addition to the formal training set out above, their knowledge and skills should be refreshed (this might be via e-bulletins, meeting other designated safeguarding leads, or simply taking time to read and digest safeguarding developments) at regular intervals, as required, but at least annually, to allow them to understand and keep up with any developments relevant to their role so they:

- understand the assessment process for providing early help and intervention, for example through locally agreed common and shared assessment processes such as early help assessments;
- have a working knowledge of how local authorities conduct a child protection case conference and a child protection review conference and be able to attend and contribute to these effectively when required to do so;
- ensure each member of staff has access to and understands the school or college's child protection policy and procedures, especially new and part time staff;
- are alert to the specific needs of children in need, those with special educational needs and young carers;
- are able to keep detailed, accurate, secure written records of concerns and referrals;

- understand and support the school or college with regards to the requirements of the Prevent duty and are able to provide advice and support to staff on protecting children from the risk of radicalisation;
- obtain access to resources and attend any relevant or refresher training courses;
- encourage a culture of listening to children and taking account of their wishes and feelings, among all staff, in any measures the school or college may put in place to protect them.

#### Raise Awareness

The designated safeguarding lead should:

- ensure the school or college’s child protection policies are known, understood and used appropriately;
- ensure the school or college’s child protection policy is reviewed annually (as a minimum) and the procedures and implementation are updated and reviewed regularly, and work with governing bodies or proprietors regarding this;
- ensure the child protection policy is available publicly and parents are aware of the fact that referrals about suspected abuse or neglect may be made and the role of the school or college in this; and
- link with the local LSCB to make sure staff are aware of training opportunities and the latest local policies on safeguarding.

#### Child protection file

Where children leave the school or college ensure their child protection file is transferred to the new school or college as soon as possible. This should be transferred separately from the main pupil file, ensuring secure transit and confirmation of receipt should be obtained.

#### Availability

During term time the designated safeguarding lead (or a deputy) should always be available (during school or college hours) for staff in the school or college to discuss any safeguarding concerns. Whilst generally speaking the designated safeguarding lead (or deputy) would be expected to be available in person, it is a matter for individual schools and colleges, working with the designated safeguarding lead, to define what “available” means and whether in exceptional circumstances availability via phone and or Skype or other such media is acceptable. It is a matter for individual schools and colleges and the designated safeguarding lead to arrange adequate and appropriate cover arrangements for any out of hours/out of term activities.

#### **Roles and Responsibilities of Staff Well Being Champion**

- Provide staff across the College with open access to information and who to go to (be a sign post) for help and support.

#### **Roles and Responsibilities of the Governing Body**

- Provide students with open access to information about self-injury and details of who to go to for help and support
- Decide whether self-injury should be covered in the College curriculum e.g. as an extracurricular presentation

- Consider parental consent and whether parents/carers should be invited to learn more about self-injury for themselves

### **Roles and Responsibilities of Parents/Carers**

- Educate themselves regarding self-injury and discuss the subject with their child
- If their child is self-injuring, work closely with the College and take an active role in deciding the best course of action for their child, including taking their child to the GP
- Keep TCC informed of any incidents outside of College that they feel they should know about
- Take care of themselves and seek any emotional support they may need in dealing with their child's self-injury

### **Supporting Students to develop strategies and promote positive social, emotional and mental health (Wellbeing and Resilience)**

The strongest evidence supports prevention/early intervention approaches that include a focus on:

- Monitoring the situation (careful and sensitive monitoring dependant on situation)
- Providing 1:1 mentoring, for staff and students, whether via the trained Learning Mentors or external specialist
- The College may arrange for College based counselling
- The completion of an assessment e.g. Strengths and Difficulties Questionnaire (SDQ) to help judge whether individual students might be suffering from a diagnosable mental health problem
- Peer mentoring
- Referral to external Child and Adolescent Mental Health Services (CAMHS), Multi Agency Referral Unit, Early Help Hub, School Nurse etc as appropriate
- Identify support strategies for students.
- Early intervention, for students showing early signs of problems
- Continuous professional development for all staff
- Clear policies on behaviour and anti-bullying
- Develop a culture within the College that values all students, allows them a sense of belonging and makes it possible to talk about problems in a non-stigmatising way
- Working with outside agencies to provide interventions for students with mental health problems
- A whole College approach to promoting the health and wellbeing of all students

### **Appendix I**



#### **AcSEED Accreditation**

The AcSEED review of your school self-assessment is now complete. The review concluded that Torpoint Community College meets the AcSEED criteria for emotional wellbeing and mental health support, and has therefore been accredited with The AcSEED Award. Congratulations!

### **Term of Accreditation**

Your AcSEED accreditation is valid for a period of 3 calendar years from the date of this award (25.06.17), after which you may apply to renew the accreditation.

#### **Assessment Observations**

The AcSEED review team were particularly impressed with:

1. Health and Well-Being Board that meets throughout the year bringing together staff and student representatives of the College.
2. CDP is based on feedback from staff, students, governors and stakeholders to assure ownership.
3. Dedicated "Health and Wellbeing (Mental Health)" policy available on web site.
4. Self Injury protocol.
5. 'Reconstruct' safeguarding health check.
6. 'worries@' confidential email.
7. Initiatives such as BRAVE individualised to student population.
8. School Nurse confidential drop in for all students.
9. Parental support through external agency programmes such as Early Help Hub or Social Care.
10. Student self-referral process to access councillor or mental health professional.
11. Use of professor from University of Plymouth to train students to become peer mentors around safeguarding and e-safety.
12. Staff INSET giving staff opportunity to try meditation, yoga, tai-chi, running and cake-making.
13. Relaxation techniques for staff also available to KS4 and post-16 students preparing for exams and coping with stress.
14. Training sessions to address Adolescent Sleep Patterns, Revision Support for their children and transition.
15. CAF's set up to engage and reach parents who are reluctant to engage.
16. Parents are invited in to specific achievement celebrations and Awards.
17. Headteacher very active in external wellbeing initiatives such as CAMHS Transformation Group

The AcSEED review team also had the following recommendations:

1. Locate information leaflets on wellbeing services in a discrete location, which could be in addition to the carousel in reception.

## Appendix 2

### Sources of Support and Information

Who	What they do	Website
Childline	A confidential service provided by NSPCC	<a href="http://www.childline.org.uk">www.childline.org.uk</a>
Samaritans	Available 24 hours a day to provide confidential emotional support for people who are experiencing feelings of distress, despair or suicidal thoughts.	<a href="http://www.samaritans.org">www.samaritans.org</a>
MindEd	Provide mental health advice	<a href="http://www.minded.org.uk">www.minded.org.uk</a>
HeadMeds	Developed by the charity young minds to provide mental health advice	<a href="http://www.headmeds.org.uk">www.headmeds.org.uk</a>
Mental Health and Bullying	A guide for teachers and other children's workforce staff	<a href="http://www.antibullyingalliance.org.uk/media/5436/Mentalhealth-and-bullying-module-FINAL.pdf">http://www.antibullyingalliance.org.uk/media/5436/Mentalhealth-and-bullying-module-FINAL.pdf</a>
National Institute for Care Excellence (NICE)	To improve outcomes for people using the NHS	<a href="https://www.nice.org.uk">https://www.nice.org.uk</a>
Place2BE	Charity working in schools providing early intervention and mental health support	<a href="http://www.place2be.org.uk">www.place2be.org.uk</a>

Play Therapy UK	Is a not-for-profit professional organisation addressing Mental Health Issues	<a href="http://www.playtherapy.org.uk">www.playtherapy.org.uk</a>
Relate	Offers advice and relationship counselling	<a href="http://www.relate.org.uk">www.relate.org.uk</a>
School Nursing Public Health Service	Supporting pupils at school with medical conditions – statutory advice for schools	<a href="https://www.gov.uk/government/publications/school-nursing-public-health-services">https://www.gov.uk/government/publications/school-nursing-public-health-services</a>
Women's Aid	National Domestic Violence Charity	<a href="http://www.womensaid.org.uk">www.womensaid.org.uk</a>
Young Minds	Charity to improve emotional wellbeing and mental health in schools up to the age of 25	<a href="http://www.youngminds.org.uk">www.youngminds.org.uk</a>
Mental Health and Departmental advice for schools	Behaviour in Schools	<a href="https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2">https://www.gov.uk/government/publications/mental-health-and-behaviour-in-schools--2</a>

## Appendix 3

### Agencies contact information

<p><b><u>Penhaligons Friends</u></b>  <b>Web:</b> <a href="http://www.penhaligonsfriends.org.uk">www.penhaligonsfriends.org.uk</a>  <b>Contact Number:</b> 01209 210624 or 01209 215889  <b>Email:</b> <a href="mailto:enquiries@penhaligonsfriends.org.uk">enquiries@penhaligonsfriends.org.uk</a></p>	<p><b><u>KOOTH Counselling</u></b>  <b>Web:</b> <a href="http://www.kooth.com">www.kooth.com</a>  <b>Contact Number:</b> 0845 3307090  <b>Email:</b> <a href="mailto:aaron@xenzone.com">aaron@xenzone.com</a></p>
<p><b><u>Barnardos Advocacy</u></b>  <b>Web:</b> <a href="http://www.barnardos.org.uk">www.barnardos.org.uk</a>  <b>Contact Number:</b> 0117 937 5500  <b>Email:</b> <a href="mailto:supporterbarnardos.org.uk">supporterbarnardos.org.uk</a></p>	<p><b><u>Suzie Project</u></b>  <b>Web:</b> <a href="http://www.susieproject.org.uk">www.susieproject.org.uk</a>  <b>Contact Number:</b> 01209 699241</p>
<p><b><u>NSPCC Helpline</u></b>  <b>0808 800 5000</b></p>	<p><b><u>Family information service</u></b>  <b>Web:</b> <a href="http://www.cornwallfisdirectory.org.uk">www.cornwallfisdirectory.org.uk</a>  <b>Contact Number:</b> 01872 323 535  <b>Email:</b> <a href="mailto:fis@cornwall.gov.uk">fis@cornwall.gov.uk</a></p>
<p><b><u>Multi Agency Referral Unit</u></b>  <b>Contact Number:</b> 0300123-1116  <b>Safeguarding concerns about a young person</b></p>	<p><b><u>Early help Hub</u></b>  <b>Contact Number:</b> 01872 322277  <b>Email:</b> <a href="mailto:earlyhelpclub@cornwall.gov.uk">earlyhelpclub@cornwall.gov.uk</a></p>

### College contact information

Phone – 01752 812511  
 Fax – 01752 815014  
 Email – [enquiries@torpoint.cornwall.sch.uk](mailto:enquiries@torpoint.cornwall.sch.uk)  
 Confidential support and advice email – [Worries@torpoint.cornwall.sch.uk](mailto:Worries@torpoint.cornwall.sch.uk)  
 Mrs B Lear- DSL - Ext No: 231  
 First Aid - Ext No: 202  
 Mr M Davey - Anti Bullying Lead  
 E-Safety Email - [eSafety@torpoint.cornwall.sch.uk](mailto:eSafety@torpoint.cornwall.sch.uk)



**TORPOINT  
COMMUNITY  
COLLEGE**

Inspiring Optimistic Learners

## Student Support Centre



The Student Support Centre at Torpoint Community College work with a large number of students, sometimes throughout their whole College life, sometimes for a fixed period of time. We take a holistic approach to support. Identifying not only a students emotional needs but to develop their individual learning styles to achieve their best outcomes.

**Penhaligon’s Friends**

Penhaligons are a Cornish charity supporting bereaved children, young people, parents and carers throughout the county. They offer children and young people the chance to meet others and share their experiences, as well as practical resources for children and parents. They also work with Jeremiahs Journey.

**Partnership working with social care.**

We have close working links with social care. This includes:

- The early help hub
- Targeted support workers
- Family support

**Suzie Project**

The Suzie project works with parents/carers who have either experienced or witnessed domestic violence.

**School Nurse—drop ins**

The School Nurse offers confidential advice and guidance to young people. A referral can be made for an appointment to be set up to see the school nurse.

**Operation Encompass and Police Partnerships**

Torpoint Community College are now part of Operation Encompass – supporting young people and families suffering Domestic Abuse/Violence. This is in partnership with Devon & Cornwall Police .

**LGBT Intercom Trust**

The Intercom Trust is an organisation to support lesbians, gay men, bisexual women and men, transgender people of all genders and orientations and the community as a whole.

**KOOTH Counselling**

One to one counselling service for young people. Support can also be given on line.

**Young Carers**

Young Carers give support to students and ensure their needs are not forgotten.

**YZUP**

YZUP offers support, information and advice about drugs and alcohol to young people under 19yrs.

**Preventing extremism and radicalisation**

All staff are aware how to respond quickly and appropriately if there are any concerns regarding extremism and/or radicalisation.

**How we support students through their journey.**

**Break / Lunch**

Supported sessions at Break and lunchtimes offer a sanctuary or enable students to improve their social skills and develop friendships. It also gives them a safe area to relax and eat their lunch.

**Working with House Leaders**

The student support centre work closely with HLoL's to gain early indication of need for the students. House Leaders have overall responsibility for students in their house and deal with any problems which arise.

**Pupil Premium**

The Pupil Premium was introduced to provide additional funding for disadvantaged students. The premium is paid for students who have been eligible for free school meals over the previous six years, who have been in care or who are service children.

At Torpoint Community College we monitor our Pupil Premium students robustly. Many interventions take place to support them such as literacy and numeracy interventions, both one to one and in small groups with the aim to support the students to deal with the many social and emotional barriers to learning they may face.

**Homework club**

Homework club offers students supported sessions every lunchtime to complete any home work set. During this time all students have access to ICT, printer facilities.

**Pre/post School Support**

Students have access to the student support centre from 08:00—08:45. This time can be used to complete homework or ensure the students are prepared for the day ahead. They can also access after College up to 4pm

**Record of Need**

The list of students who have a Statement of special educational need, have an EHC plan or who receive targeted support are kept up to date on the Record of Need. For targeted students this support is flexible ; for example if they are seen to be making expected level of progress in most of their subjects, the level of additional support may be reduced for a temporary period of time or possibly permanently. We will always encourage independent learning where possible.

### Mentoring – one to one or group

Students can be referred for mentoring sessions by HLOL or tutors. They can also be at the request of parents or self referral. Individualised programmes are set to support social/emotional mental health needs of the young person.

### Literacy and Numeracy programmes

Individualised programmes are designed to support Literacy and Numeracy. Additional Literacy support programmes are used in small group and one-to-one sessions. Students work with a mixture of fiction and non fiction texts designed to improve essential Literacy skills which are used across the curriculum.



### Visual Screening

The Student Support Centre provide visual screening testing. This test can determine if the student has visual stress. Signs and symptoms of this include: print distortion, light sensitivity and visual discomfort. This test enables the students to access coloured overlays to reduce eyestrain to help with their reading.

### Dyslexia—specific programmes

We provide screening for students at risk of dyslexia and liaise with the county dyslexia advisor. Staff provide mentoring in class support and targeted support plans which are facilitated by learning mentors. Current assessments used include: ARTi, Lucid Lass and Pearson Dyslexia screening.

### CBT

CBT is based on the concept that your thoughts, feelings, physical sensations and actions are interconnected, and that negative thoughts and feelings can trap you in a vicious cycle.

In College we use CBT as part of the mentoring programme with the aim to help students deal with overwhelming problems in a more positive way by breaking them down into smaller parts. They are shown how to change these negative patterns to improve the way they feel.

### Emotional health and wellbeing

In College we use a developmental model to help us understand how we develop socially and emotionally from birth through to adulthood. This model gives us a framework for understanding what healthy child development looks like in terms of behaviour and learning and clarifies what the role of adults should be in facilitating a child's development at each of the different stages. In addition, the model gives us a lens through which to look at and interpret children's behaviour, enabling us to identify the particular developmental needs being signalled by their behaviour and to choose appropriate, targeted interventions designed to meet those needs.

### Self Harm

TCC have taken part in a project to support young people in Cornwall who are vulnerable to self harm. Staff support students through their journey. The Butterfly Project and Rainbow Journal are examples of resources that are used in conjunction with Cognitive Behavioural Therapy resources during 1:1 mentoring sessions.

### Support for Students with Medical needs

Students have access to and are supported by the First Aid team in the College

In the medical room we carryout physiotherapy, administer medication, liaise with the school nurse, treat injuries and look after students that are ill. We contact parents / carers and keep medical records up to date. Liaising with staff and parents to ensure staff are aware of health care plans and that they are up alerted prior to trips or visits off site.

Our medical needs coordinator is Mrs K.Matta, her role involves liaising with Parents / Carers to provide up to date health care plans for students with medical needs. All medical information and forms can be found on the College website.

### Parental feedback

" I feel that my daughter has made great progress and has received excellent support and looks forward to her group

"we are both very happy with the support staff have given to our daughter".

"It is heartening to know that when my daughter is upset/angry there is always someone with a kind word, a smile and a point in the right direction. Issues are dealt with kindly and discreetly and my daughter is a happy and much more confident young lady".

"My daughter has found strength and self confidence since accessing the student support services for support".