KILLARNEY SCHOOLS' MENTAL HEALTH & WELL-BEING PILOT PROJECT REPORT

2016

Acknowledgements:

This Pilot Project set out to support the young people of Killarney and their Mental Health and Well-being. There have been many successful pieces to this project and I have been privileged to be a small part of its success.

I owe a sincere sense of gratitude to the three Principals and their staff teams who assisted and supported me in every step of this project and who were the driving force in its acceleration forward, for the young people who took a chance on the project and made it their own, you are the leaders and 'care takers' of the future and what a pleasure it has been to get to know you all, and, finally, to Claire O'Toole and the Steering Group who all continuously reviewed and contributed their time, energy and advice in making it the success it was and I hope continues to be long after I have completed my piece.

I would like to extend my sincere thanks to all of you and wish you all the very best into the future as you continue to initiate, innovate and deliver wonderful ideas and programmes of work in the whole area of Mental Health Promotion for all.

Killarney is in safe hands.

Yours sincerely,

Niamh Mulligan (Coordinator)

Participating Schools:

- Killarney Community College
- St. Brendan's College Killarney
- St. Brigid's Secondary School Killarney

Coordinator

- Niamh Mulligan

Additional Agencies involved in the Project:

- National Education Psychological Service
- Children and Young People's Services Committee
- Kerry Diocesan Youth Service
- South West Counselling

Funding Agencies:

- Killarney Community College
- St. Brendan's College Killarney
- St. Brigid's Secondary School Killarney
- ESB Electric Aid
- Community Foundation of Ireland

Editor:

- Kellie Sheehan
- Members of the Steering Group (CYPSC Coordinator, NEPS, School's Management)

Glossary:

CAMHS – Child & Adolescent Mental Health Service

CFA – Child and Family Agency (TUSLA)

CI – Critical Incidents

DCYA – Department of Children and Youth Affairs

DES – Department of Education and Skills

DOH – Department of Health

FRC – Family Resource Centre

GP – General Practitioner

HSCL – Home School Community Liaison

HSE – Health Service Executive

KDYS – Kerry Diocesan Youth Service

Kerry ETB – Kerry Education & Training Board

LGBT – Lesbian, Gay. Bisexual & Transgender

NBSS - National Behavioural Support Service

NCCA – National Council for Curriculum & Assessment

NEPS – National Educational Psychological Service

OECD – Organisation for Economic Co-operation and Development

PDST – Professional Development Services for Teachers

RE – Religious Education

RSE – Relationships & Sexuality Education

SEN – Special Educational Needs

SNA – Special Needs Assistant

SPHE – Social Personal & Health Education

SSE – School Self-Evaluation

[1]**SST** – Student Support Team

SWCC – South West Counselling Centre

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[1] **Student Support Team** is now the term used for what was previously known as Pastoral Care Team. The **Student Support Team (SST)** comprises of a small core group of staff members with specialist roles who meet weekly to address the needs of a small number of students (NEPS 2014 p.6).

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EXECUTIVE SUMMARY

The Killarney Schools Mental Health and Well-Being Project was developed in response to the impact of 16 youth tragedies, including five deaths by suicide (aged 14-19) since 2010, upon the schools and community of Killarney. The three secondary schools were challenged to cope with the impact of these tragedies upon their students and as a result, in 2014, the Kerry Children & Young People's Services Committee (CYPSC) began working with the three schools, in collaboration with a number of other agencies, to address this issue. Following the appointment of a Project Coordinator, the pilot project was established in April 2015.

The Framework for the project was based on a whole-school approach to mental health promotion and drew on four important pieces of legislation and policy to inform its content and approach which included the Education Act 1998, Better Outcomes, Brighter Futures (DCYA 2013), Student Support Teams in Post-Primary Schools: A Guide to Establishing a Team or Reviewing an Existing Team (NEPS 2014) and Well-being in Post-Primary Schools (DES et al. 2013). Moreover, results from the three separate pre-project questionnaires completed by students, staff and parents provided important insight in to the areas which were necessary to address and as a result of brainstorming meetings and two facilitated sessions with all key stakeholders a clear vision of what the project could and should achieve was developed. The project aims identified were:

- Strengthening Links Across Schools;
- Strengthening Links with Parents and Home;
- Strengthening the Capacity of the Schools Student Support Teams to Cope with the Challenge of Providing On-going Mental Health and Well-Being Supports;
- Strengthening Links with Community Services and Supports;
- Developing a School Mental Health and Well-Being Handbook.

Project funding was provided by ESB Electric Aid and the Community Foundation of Ireland as well as the three participating schools.

This project was evaluated from the perspective of participating students, parents and school staff, as well as the Pilot Project Steering Group. Both quantitative and qualitative data were used in this project evaluation, gathered from separate student, parent, staff and Steering Group on-line questionnaires developed specifically to evaluate the Killarney Schools Mental Health & Well-being Pilot Project.

The findings from this report clearly demonstrate that the project has been successful in meeting many of its objectives. Nevertheless, from the schools' perspective, this is only the beginning, as they aim to introduce several more initiatives to build upon the valuable work they have completed so far and to continue to support and improve the mental health and well-being of their students. The following is a summary of the key findings of the report.

Key Findings:

- Prioritising the Whole-School Guidance plan and Mental Health Policies that underpinned the work was crucial and took time to implement effectively. It involved collaboration and promoted collegiality and a positive environment for all.
- Supporting and structuring the Student Support Team, and clearly defining roles with a shared leadership, was vital for the efficiency and effectiveness of any mental health and well-being programmes that followed.
- Providing a greater awareness and appreciation of the services and the roles they play for young people in the community was essential for positive working relationships across the sector.
- Strengthening the school and community links through the formal meeting with agency and school staff, and providing a handbook about agency and school staff, was a significant piece of work. As a result, school staff now have a clear understanding of the roles and responsibilities of external agencies. Information on external services is essential for schools in order to provide effective referrals and gather information that is necessary for some cases within the school.
- The sharing of information across schools was very beneficial for all three schools and developed a broader sense of community.
- Strong leadership, from the Principals, the Guidance Counsellors, the Project worker and the Youth Mental Health teams was vital for the success of the programme and its future sustainability.
- The partnership and involvement of staff, who may not have had the opportunity previously to get involved, was crucial for the sustainability of the programme.
- Providing for and acknowledging the self-care and support required by staff in relation to their own mental health and well-being was extremely beneficial for the entire school community.
- Findings from the questionnaires completed by students, families and staff highlighted the areas that are working well and key issues that still need to be work on.
- Schools' reported that the mental health and well-being of staff is promoted and Student Support Teams and Critical Incident policies are established. Students' reported that they knew who to "*go to"* if they need support. In addition, parents reported being "*informed about mental health and well-being programmes*" and are "*comfortable*" talking with their child's teacher regarding their children's well-being. Furthermore, the Steering group commented that mental health policies were prioritised and that "*without the initiative would not have been completed*". Areas of improvement included: enhancing parental participation, explicit knowledge of the membership of the Student Support Team and also the identification of a key person to maintain the well-being collaboration across the three schools in place of the pilot project coordinator.

Recommendations for Future Projects:

- To set clear and achievable targets each year. As the school principals report "*bite off something small and have clear goals each year*".
- At the beginning of each school year, the Mental Health plan for each year-group must be included in the Whole-school Guidance Plan. This provides a shared vision particularly as a result of the consultation with staff, student, parents and agencies.
- To ensure student participation, suggestions and ideas are encouraged, valued and incorporated in the development of any plans or programmes for the year as their input and energy is a crucial component of effective well-being work.
- In keeping with the specifications of the new Junior Certificate, to create an advisory panel for each school in order to provide consistent mental health and well-being programmes for both the Junior and Leaving Cert Cycles.

- To maintain strong leadership from management and a commitment of collaboration and support.
- To allocate a lead person from each school to collaborate across the schools.
- To develop a needs-analysis and shared vision for each school, driven top down and also bottom up by students, teachers and parents.
- To continue to build on the community links which now exist. The Steering Group view this as a "*crucial step, as without close ties and pathways to engage community resources and supports the overall success of the project becomes limited*".
- To invite external agencies to participate in SST meetings on a regular basis to ensure schools continue to strengthen relationships with the agency staff and vice versa.
- Source financial and administrative resources needed to ensure the vision and its aims are realised.
- To maintain and expand the Steering Group, perhaps with new staff and members to lead the programme going forward and to meet once per term.
- To continue to work with all partners including the Parent Councils to increase parental participation. As the Steering Group recommend it is important to "*acknowledge and include parents in the process of understanding youth mental health to support schools in supporting students*".
- This programme provided a starting point. However, several more initiatives could improve the well-being of our students through pooling resources, increased networking and sharing knowledge between the schools and relevant agencies, families, staff and students.
- Establish agreed communication protocols with external agencies regarding shared students of concern.
- The project was made possible because of the established, good working relationship between all three school principals. This is an essential starting point for similar projects to be established in other areas.

1. INTRODUCTION

Youth mental health is defined as *"the mental and emotional well-being of young people during the development phase of their journey into adulthood"* (DES et al. 2013 p.6). According to DCYA (2013), 75% of mental health difficulties emerge before the age of 25, thus the adolescent years are a time of increased vulnerability for young people. Currently, in Ireland, one in ten children and young people experience mental health difficulties and this prevalence of mental health difficulties is increasing over time (HSE 2012).

Although certainly not solely responsible, our secondary schools play a vital role in promoting positive mental health and well-being (DCYA 2013). According to the DES et al. (2013 p.7) there is *"substantial evidence that mental health promotion programmes in schools, when implemented effectively, can produce long-term benefits for young people including emotional and social functioning and improved academic performance".*

About the Killarney Schools Mental Health & Well-being Pilot Project

Background:

In 2014 Kerry Children & Young People's Services Committee (CYPSC) began work with the three secondary schools in Killarney: St Brigid's Presentation Secondary; Killarney Community College; and St Brendan's College together with the National Educational Psychological Service (NEPS); South West Counselling Centre (SWCC); Kerry Life Skills; Kerry Diocesan Youth Service (KDYS) and Ballyspillane Family Resource Centre with the support of the HSE and Tusla in order to develop the **Killarney Secondary Schools Mental Health and Well-Being Pilot Project**. The project was developed in response to the impact of 16 youth tragedies, including five deaths by suicide (aged 14-19), since 2010 in Killarney. These suicides and tragedies had had a huge impact on the schools and community of Killarney. Many of these young people were attending secondary school at the time of their deaths and while others were not, their siblings, cousins and friends attended the schools which meant their deaths impacted on the students of all three secondary schools and had a lasting effect.

The schools were challenged to cope with the impact of these tragic youth deaths on their school populations through the implementation of their Critical Incident Policies, the provision of counselling supports in school, accessing the support of NEPS and external counselling supports on behalf of students and the roll out of many positive mental health initiatives. However, the succession of tragedies year on year, in particular over the summer months during school holidays, meant that schools had to face a significant critical incident at the beginning of successive school years. The problems faced by the schools and their Student Support Teams (SSTs) had also been exacerbated by a number of educational cutbacks, not least of which was the removal of Guidance Counsellors from the resources allocated to schools. Additionally, until the development of the Killarney Schools Mental Health & Well-Being Pilot Project the secondary schools endeavoured to respond 'independently' to the needs of their students as difficulties emerged.

The pilot project was established in April 2015 following the appointment of a Project Coordinator. Funding applications were successfully made to ESB Electric Aid and the Community Foundation of Ireland to support the project and local funding, via the schools, was also sourced to support it. The total project costs were

€20,000. Given the commitment of all stakeholders together with the financial costs of the project, the Project Steering Group gave a commitment to capture the learning from the project in order for the learning to be shared and the model replicated in other areas.

Project Aims & Objectives

The core objective of the project was to effectively support the mental health and well-being of all secondary school students in Killarney. In particular, the project aimed to identify and develop ways in which supports could be enhanced and strengthened for students with identified additional mental health needs. The aims of the Killarney Schools Mental Health & Well-Being Pilot Project were to:

1. Strengthen Links Across Schools

- Develop a shared response to **Critical Incidents** across all three schools to respond effectively and collectively when a tragic incident or youth suicide occurs.
- Strengthen the links and cooperative practice across all three schools. This will be achieved by the schools working together to identify and share training and up-skilling opportunities; working together to plan and implement information events for parents and students including 'Positive Mental Health Weeks'. This will enable the schools to maximise their resources across the schools.

2. Strengthen Links with Parents & Home

- Strengthen the links between school and home. Presently there is only one part-time Home School Community Liaison Coordinator (HSCL) in Killarney, who supports the Killarney Community College. The other two secondary schools (St Brendan's College & St Brigid's Secondary) do not have access to HSCL support. The role of connecting home with school is recognised as being crucial in terms of positive outcomes for young people. In order to strengthen the links between home and school the project worked with the schools and teachers to:

    - Develop a deeper awareness of pupils' and families circumstances;
    - Promote parental involvement in pupils' learning;
    - Provide opportunities for parent-teacher interaction.

This element of the project requires the inclusion of young people, families and the community in working together to seek solutions to presenting issues and linking closely with relevant local agencies and services such as KDYS which have a strong connection with families.

3. Strengthen the Capacity of the Schools' Student Support Teams (SSTs) to Cope with the Challenge of Providing Ongoing Mental Health & Well-Being Supports

- Strengthen the capacity of their SSTs by accessing training from NEPS, the National Behavioural Support Service (NBSS) and HSE Health Promotion (HSE HP).

- Strengthen care team structures and referral pathways both within and outside the schools by clearly identifying the members of the SSTs & their roles; how they link in with other key staff members such as Year Heads, Principals, Deputy Principals, and Teachers with responsibility for Special Education and sports etc.; as well as other key members of staff such as Caretakers, School Canteen Staff etc. Clear links and referral pathways will also be strengthened with 'external' supports including NEPS, CAMHS, South West Counselling Centre (SWCC), Kerry Diocesan Youth Service (KDYS), Kerry Life Skills, and Ballyspillane Family Resource Centre (FRC).

- Establish De-Briefing Supports for the SSTs with SWCC which will enable them to review their work, in particular critical incidents and challenging cases each term to ensure positive learning going forward. De-briefing Support was provided by SWCC to schools at the end of each school term.

4. Strengthen Links with Community Services and Supports

- Strengthen links with community services such as SWCC, KDYS, Kerry Life Skills and Ballyspillane FRC and access the supports which they can provide. Community supports which can be leveraged by strengthening their links to community services include individual student counselling supports, group counselling, mentoring supports, education programmes such as building resilience, substance misuse, healthy sexuality etc. While there are many programmes available to schools which can be delivered both within the schools and at community level it is very challenging to sustain them and integrate them within the school culture.

How the Project Worked

Vision

A clear vision of what the project could and should achieve was developed in partnership with all relevant stakeholders before the Killarney Secondary Schools Mental Health and Well-Being Pilot Project was established. Brainstorming meetings and two facilitated sessions were held with school Principals, Guidance Counsellors, SPHE Coordinators and agency representatives including NEPS, KDYS, SWCC, Kerry Life Skills, Ballyspillane FRC, Tusla, HSE Mental Health Service & Kerry CYPSC. This vision was outlined in the project aims and objectives and was used to guide and oversee the project throughout.

Governance:

The Killarney Secondary Schools Mental Health and Well-Being Pilot Project Steering Group met regularly (monthly / bi-monthly) to oversee the project. Meetings had a clear agenda which included:

- Coordinator's Report;
- Principals' Updates;
- Achievements so far – as per aims & objectives;
- Barriers – any difficulties which need to be addressed.

This ensured that the project stayed 'on track' and all agreed actions were followed up and achieved. For example the Steering Group identified the need for, and coordinated, the Networking Event in December 2015. This helped address the 'information deficit' in terms of the services and supports available to support the mental health & well-being of students in Killarney as well as facilitated an opportunity for schools and

services to get to know one another i.e. 'put a face to the name'. In addition, the Steering Group provided essential guidance and supervision for the Project Coordinator throughout the project.

The Steering Group will continue to meet once per term in order to ensure the learning is embedded across the three schools. A progress update on the project was provided to the Kerry CYPSC Child and Youth Mental Health Working Group monthly. Again, this ensured that the project stayed on track and the learning was shared across all child and youth agencies in Kerry.

School Level Implementation

The success of the project depended on three separate but interlinked elements:

1. Clear vision, leadership & commitment to the project from the three Principals;
2. Clear vision, guidance & support to all staff, in particular the SSTs, from the Project Coordinator;
3. Commitment from all staff, in particular SST members in all three schools.

The Project Coordinator was the 'glue' that held the project together on the ground. She worked with each school for five hours per week, liaising with the Principals, SST Members and all relevant staff members as well as students on the Student Mental Health Teams. She supported the coordination of in-school events including the Mental Health Weeks and Amber Flag initiatives with staff and students as well as the review and updating of school policies and procedures.

With the support of the school Principals the Project Coordinator helped to:

- Restructure the SSTs:
    - Membership, roles & responsibilities were established;
    - SST agenda templates were agreed;
    - Training for SST members was organised with NEPS and the NBSS;
    - Clear referral pathways into the SSTs and from the SSTs were established;
    - SST Referral and action forms were established.
- Review and update all relevant policies & procedures (all relevant staff were engaged in this as appropriate).
- Developed a Whole School Guidance Plan for each school, again in partnership with school Principals & relevant staff.
- Supported collaborative Parents' Information Evenings for the three schools.

In partnership with all relevant staff and students the Project Coordinator supported the organisation and implementation of:

- Mental Health Weeks across the three schools;
- [2]Amber Flag Initiatives across the three schools;
- Student Mental Health Teams in all three schools.

[2] **The Amber Flag Initiative** is a national initiative developed by Suicide Aware which promotes positive mental health in schools, clubs and organisations. Please see Appendix B for further information.

2. EVALUATION METHODOLOGY

This pilot project was evaluated from the perspective of students, parents, school staff and the Pilot Project Steering Group. Four separate on-line questionnaires were developed specifically for the project – students (n=416 responses), parents (n=310 responses), school staff (n=125 responses) and the Steering Group (n=8 responses). These questionnaires, comprising of both quantitative and qualitative questions, were divided in to four sections which include questions to elicit demographic information, participant perspectives of Internal School Supports, of External School Supports and of Partnerships with Parents and School Staff (Appendix A). The baseline results from this analysis were used to inform the content of the pilot project.

At the end of the programme, students, parents and school staff and the Pilot Project Steering Group completed follow up questionnaires. A one-year follow up questionnaire was completed by the three schools' staff and the Steering Group. The scope of this report and the time and resources did not permit the findings of the surveys to be analysed in detail. However, some broad findings and comments common across the three schools on the areas of strength and in need of improvement as a result of the project are reported throughout the report, to give a 'snapshot' of the opinions of key stakeholders: students, school staff, parents and the Steering Group (comprised of school principals and external agencies).

3. FRAMEWORK FOR THE PILOT PROJECT

The Framework for the project was based on a whole-school approach and drew on four important pieces of legislation and policy to inform its content and approach. These included the *Education Act 1998*, *Better Outcomes, Brighter Futures* (DCYA 2013), Student Support Teams in Post-Primary Schools: A Guide to Establishing a Team or Reviewing an Existing Team (NEPS 2014) and *Well-Being in Post-Primary Schools: Guidelines for Mental Health Promotion and Suicide Prevention* (DES et al. 2013). The latter addressing the continuum of support for mental health needs of 'all', 'some' and 'a few' young people. Based on this framework the three schools were required to:

- Develop a clear Whole School Guidance Plan while also informing other policy and curricular developments in the area of Mental Health and Well-being for all young people.
- Update school policies in relation to Mental Health and Well-being.
- Provide an effective SST structure in the schools to support a positive Mental Health and Well-being programme for some young people.
- Provide clear referral pathways for the 'few' students who require external supports outside of school supports

4. PROJECT ACHIEVEMENTS

This section provides a summary of the many objectives / accomplishments achieved as a result of this pilot project.

4.1 Whole-School Guidance Plan

It is a statutory requirement for schools to provide guidance to *"ensure that students have access to appropriate guidance to assist them in their educational and career choices. As well as, promote the moral, spiritual, social and personal development of students and provide health education for them"* (Education Act 1998). As part of this Pilot Project, each school developed a Whole-School Guidance Plan which is considered an essential component of a whole-school approach to mental health promotion (DES et al. 2013).

The Whole-School Guidance Plan involves all aspects of school life and as such it is a whole school activity. Thus, in fulfilling their obligation to provide access to appropriate support and promote well-being, a large team of staff working in partnership with families, the student council, the youth mental health teams, relevant agencies of support and the board of management updated the Whole-School Guidance Plan for each school. These plans are now available on request in each school's office, where families and students can access information to assist their development.

The whole-school guidance plans were influenced by the 'Well-Being in Post Primary Schools: Guidelines for Mental Health Promotion and Suicide Prevention' (DES et al. 2013). The schools development of their whole-school guidance plan now refers to these outcomes for young people, as well as a range of learning experiences, provided in a developmental sequence, that assist students to develop self-management skills which should lead to effective choices and decisions about their lives.

The plan aims to assist the holistic development of all students so that they are safe and healthy, learn to know and value their talents and abilities and effectively manage their personal transitions, while at the same time learn to value and respect others and make a positive contribution to society. It encompasses the three separate, but interlinked, areas of Personal, Psychological, Physical and Social health; Educational guidance and support; and Career choice and opportunities. This threefold approach is the provision of a caring and supportive service on which the pilot project was built.

In a follow up questionnaire, the Steering Group valued this, with 91% of respondents reporting that policies and procedures for mental health have been maintained one year following the project. One member commented *"several policies were prioritised this year that without the initiative would not have been completed"*. In addition, there is *"confidence in each school regarding their policies and procedures"*.

4.2 Student Support Structures

"The student support structure in a school describes the systems that relates to student welfare, early intervention and identification of difficulties, behaviour management, SPHE and RSE programmes, child protection procedures and a critical incident policy" (DES et al. 2013 p.23). As part of the pilot project, the Student Support policy and plan was updated for each school and sets out the components of this system which includes the SPHE curriculum; the behavioural management system; the role of the Year Heads, Guidance Counsellor, Home School Liaison, Special Learning Support teacher. An outline of which is now available in each schools current Whole-School Guidance Plans.

The Student Support Team Policy has also been updated and addresses the following areas:

- Aims of the Team;
- Roles and Responsibilities;
- Programmes;
- Referral Forms and Procedures;
- Linking Student Support with Guidance Counselling, School Counselling, Home school Liaison, Learning Support and Special Needs;
- Linking Student Support with Social, Personal and Health Education;
- Resources and Professional Development;
- Implementation Plan;
- Monitoring and Evaluation.

By the end of this project and at one year follow up, the Steering Group reported that the "*care team was broadened and structured".* Boards of Management in each of the three schools had revised and ratified new Student Support Policies[3] for the schools. The policies will be reviewed and amended as appropriate every two years.

Importantly, the students' surveys across the schools have indicated that 65% of students know "*who I can go to if I need support*". However, a lesser number (43%) know who are the "*support staff (Student Support Team) within my school".* This may suggest that the membership of the Student Support Team (SST) needs to be made more explicit to the students.

4.21 Student Support Team (SST)

The Student Support Team (SST) is an integral part of the student support system. The team, responsible for providing student support within the school, consists of a *"small core group of staff members with specialist roles…who meet weekly to address the urgent needs of a small number of students"* (NEPS 2014 p.6). They do not work alone, but rather within the larger student support system and ethos of restorative practice and co-operative learning.

[3] **Student Support Team** is now the term used for what was previously known as Pastoral Care Team. The **Student Support Team (SST)** comprises of a small core group of staff members with specialist roles who meet weekly to address the urgent needs of a small number of students (NEPS 2014 p.6).

The SST includes:

- Guidance Counsellor/s;
- Year Heads;
- Home School Liaison Officer where allocated by DES;
- Principal/Deputy Principal;
- The SPHE Coordinator;
- Where necessary: Class teachers / Learning Support Coordinator / Special Needs Coordinator / Special Needs Assistants / Chaplain.

The SST's responsibilities include:

- Co-ordinating the support available for students in the school;
- Providing clear referral pathways;
- Facilitating links to the community and other non-school support services;
- Enabling students with support needs to continue to access a full education;
- Assisting staff to manage those students effectively;
- Ensuring new staff members are briefed about policies and procedures relating to student well-being and support;
- Advising school management on the development and review of effective student support policies and structures.

The Well-Being in Post-Primary Schools (NEPS 2014) guidelines provided the framework to establish/review the PTCs in each of the three participating secondary schools. As a result of the project, there are now clearer structures and procedures in place for the SST. The team are required to hold regular designated meetings, preferably on a weekly basis. Additional professionals are occasionally invited to attend meetings (NEPS, South West Counselling and KDYS) in which they are encouraged to contribute. As a result of this pilot project, students' suggestions and feedback were encouraged in relation to future student care and implementation of mental health promotion policies and structures. They were also encouraged to provide suggestions and be actively involved in the programmes in place throughout the project.

Any young person discussed within the SST is confidential. However, there are some limitations, as Year Heads and certain staff may need to be informed of specific supports necessary for a young person. Parents will be informed if any additional intervention is warranted or issues emerge in relation to the young person's learning behaviour or mental health. Positively, 60% of parents who replied to the survey felt "*very comfortable"* talking to their child's teacher about their child's well-being, however, a lesser number (45%) knew who the pastoral care/ SST are. Similar to the students' survey, this suggests ongoing 'reminders' on the role and membership of the SST may be needed for the parent and student bodies.

Roles & Responsibilities of members of the Student Support Team:

Responsibilities of the core members of the team are agreed, recorded and reviewed on a regular basis. Appendix C provides further information on individual SST roles and responsibilities.

Professionals from external agencies:

- Professionals from external services/agencies will be invited to attend certain meetings. These may include the school psychologists, NEPS, Education Welfare Officers, Special Needs Officers, Health Services Executive staff may attend when appropriate, SWCC or the KDYS.

4.22 Referral Processes and Procedures

As a result of the pilot project initiative, there are now better internal and external referral processes in place to support students with mental health concerns within the three secondary schools. Fifty per cent of school staff report "*excellent*" to *"very good"* referral procedures. The internal referral pathways include a referral form (essential for assurance purposes) for teachers to complete when they have concerns about a student's mental well-being which is given to the SST Coordinator.

Other pathways and procedures of referral include:

- Year head / Class Teacher reports
- SPHE coordinator plans
- Home School Community Liaison / Guidance Counsellor / Counsellor issues from arising events

The urgency of a matter is the determining factor in prioritising issues and the coordinator allocates time to address as many students/issues in order of priority on that day. A hard copy of the referral and the subsequent decisions and follow-up plans made by the SST is kept for the team, management and Year Head to access. They clarify any issues and sign off on the proposed plan. These confidential records are kept in a central system, only accessible to the SST.

Information on external services is essential for team members to familiarise themselves with in order to provide effective referrals and gather information that is necessary for some cases within the school. As a result of the pilot project, the SST have developed stronger relationships with external statutory and voluntary agencies to ensure that students and their families have information and ease of access to the necessary supports required to meet their level of need. All other staff were also provided with the opportunity to form these essential links with agencies (for further details, refer to section 4.5 of this report). In the opinion of 83% of the Steering Group; these external links have been maintained, at one year follow up.

4.23 Student Support Programme

Social, Personal and Health Education (SPHE) is a core area of school life and supports the promotion of positive mental health for all students, thus, its link to pastoral care / Student Support is clear. Seventy six per cent of students across schools reported "*good"* to "*excellent"* SPHE classes to deal with mental health issues. The schools' mental health programmes now deal with such areas as promoting positive mental health, encouraging healthy lifestyle, preparing young people in life and coping skills and promoting positive relationships within the school through group-based work. They also promote mentoring and leisure activities with a focus on team building exercises. Student input, through the Youth Mental Health teams[4], is an

[4] **Youth Mental Health Teams are part of the Amber Flag Initiative**. Please see Appendix B for overview of the Amber Flag project.

essential component of the mental health programme. Furthermore, the programme provides teachers with the opportunity to gather resources and undergo relevant mental health and well-being training.

4.3 Strengthening Students' Voices and Participation in Mental Health Promotion

Student participation, which relates to *"young people being actively involved in making decisions that affect their lives"*, is an essential component of effective mental health promotion within schools (DES et al. 2013 p.24). Findings from the initial pastoral care survey, completed by students, staff and parents from the three secondary schools in Killarney, clearly identified that the students did feel their voice was being heard but not to a sufficient degree when it came to their Mental Health. An essential component of a whole-school approach to mental health and well-being is to ensure student participation in relation to the planning and developing of the programmes, policies, activities and promotions taking place within their own schools (DES et al. 2013).

As part of the students' surveys 25% to 45% of students reported that there were *"very good"* to *"excellent"* ways in which *"students have a say in how they are being looked after in relation to their mental health and well-being".* In addition, 33% to 44% of students reported that *"students can have their voice heard if they have issues in their school".* This was a lower score than the Steering Group had anticipated, therefore, as part of the project, additional efforts were made to strengthen students' voice.

Initially, to encourage student participation, leaflets were distributed to all students to ensure they were informed of the pilot project and its overall aims. In addition, the project coordinator visited all three schools and spoke to all student groups individually, to promote the pilot project and request their assistance and ideas in developing it. As the Steering Group reported this was to ensure "*meaningful engagement with the students*". Students were eager to participate and, regardless of their age or class group, were welcome to volunteer. As part of the Amber Flag initiative (see Appendix B for details), Youth Mental Health Teams[4] were formed. In addition, staff, from a variety of departments, volunteered to provide the necessary support to the Student Youth Mental Health Teams. The school Guidance Counsellors and SST members were also available to assist with any support required.

The student members of the Youth Mental Health Team were required to commit to one year of supporting and promoting mental health within their school in the hope of initiating programmes that may become sustainable. The numbers of young people on the teams varied but each were equally effective in what their team delivered.

Aims of the Youth Mental Health Team:

- To help young people to get involved in promoting their own positive Mental Health and Well-being.
- To provide a framework for schools to ensure that young peoples' voices are heard when it comes to developing school programmes and initiatives for young people's Mental Health promotion.
- To include input from all members of the school community when drafting the whole-school guidance plan.

- To provide structure to ensure young people have every opportunity to share information relating to their mental health with the school staff, external agencies and families.
- To allow students to work in collaboration with adults in taking responsibility for their own Mental Health promotion.
- To encourage young people to become active members of their communities for sustained improvement in the promotion of Mental Health worldwide and not just in their school.
- To gain a different perspective on Mental Health promotion.
- To develop school initiatives for students to lead in their school and community to promote positive Mental Health.
- To set targets for the school in relation to supporting Youth Mental Health.
- To allow young people to influence policy and effect change with regard to positive mental health.

The structure and set-up of the Youth Mental health teams:

- Two class teachers were required to assist the Youth Mental Health Teams to become established. Their role was one of support and guidance only.
- There is no limit on the number of volunteer students that can approach the Youth Mental Health Team and become involved in the work.
- Each member commits to the weekly / fortnightly meetings and to lead some activities.
- All meetings are structured and have a time frame with an agenda of work.
- One or two students will lead the meetings and rotate the lead role each term.
- Young people vote on who should lead the meetings (school staff member assist with management and delegation for fair procedure).
- Young people, with the permission of management, introduce and organise guest speakers.
- The team actively promote Mental Health awareness in the school and at the beginning of each year, set out targets in line with maintaining their Amber Flag Award. One member is responsible, with the assistance of staff, to keep the Amber Flag folder and notice board in order.

Programmes the Youth Mental Health Teams delivered during the Pilot Project

The following is a list of the student led initiatives of the Youth Mental Health Teams, with the support of staff:

- Helped to develop the surveys for students, staff and parents and actively encouraged young people to fill them out.
- Actively contributed to the Whole-School Guidance Plan and offered suggestions for the same.
- Promoted inclusion for all when assisting in developing information for LGBT issues.
- Promoted a 'positive thought for the day' on notice boards, classrooms and intercoms systems.
- Co-facilitated, with an SNA staff member, the weekly Mindfulness programme (open to all staff and students).
- Assisted staff in sourcing speakers for the mental health weeks.
- Promoted competitions and fun activities as part of the mental health weeks held within the schools.
- Assisted in the mentoring programmes to help first year students' transition from primary to secondary school.
- Achieved the Amber Flag (Appendix B) in each school to highlight Mental Health Promotion activities within each school.

- Were responsible for providing notices, in significant places within the school, to ensure all students/staff are made aware of who the members of their SST are.
- Were responsible for introducing speakers coming to the school to promote Mental Health topics and issues.
- Offered suggestions to the SST in relation to issues arising for students in the various year groups and assisted in the development of the SPHE programme and areas of focus.
- Assisted in leisure and sports activities to support young people's health.

4.4 Strengthening Links with Families and Statutory and Voluntary Agencies

Strengthening links with Families

During the project, the coordinator attended a Parents' night to discuss youth mental health and the aims of the project; feedback from parents was also encouraged. In addition to the findings from the parents' baseline questionnaire (Appendix A), this feedback informed the projects approach to increasing parental participation. As a result, the schools endeavoured to be more open and transparent. To achieve their objective, the schools worked in partnership with the Parent Councils and arranged parent information evenings collectively across the three schools. All relevant policies and procedures were also made available to parents, upon request, in each school's office. In the parents' survey 75% of parents reported being able to *"access resources from the school about relevant mental health and well-being topics for children".*

Strengthening links with Statutory and Voluntary Agencies

The guidelines (Grogan 2013 p.18) suggest "*schools need to be proactive in identifying and building relationships with key statutory and voluntary agencies, so that key personnel know how to access services and who to contact in the event of a crisis".* The Steering Group, comprising of school principals and local support services (CYPSC, NEPS, KDYS, SWC, Kerry Life Education, CAMHS), all worked together to ensure a share vision as it was viewed that "*the support of community services to help the schools achieve the objectives of the project was crucial".*

Aims of strengthening links with Agencies and Families:

- To develop quality relationships with the families and ensure that they are fully informed and play an integral role in mental health promotion.
- To develop strong links with community agencies.
- To facilitate the transfer of quality information in relation to the young people we are working with in the schools and the community in general.
- To ensure staff have current information with regard to the most appropriate service to refer a student/family should they require specific type of support/services.
- To provide continuity of support to the students.
- To maintain a network of support for those in our school system including students, families and staff.
- To utilise the expertise of different professional agencies when dealing with specific student / family / staff issues.
- To harvest ideas from external services and work together to support our students and staff.
- To ensure clear pathways of referral for students when dealing with a crisis situation for them.

School Staff / External Agencies Networking Event - December 2015

A networking event was arranged, with the support of KDYS, Tusla and the project worker, in order for school staff and agencies to meet and familiarising themselves with the relevant services and the aim of each. As part of the event:

- The SST and management of the three schools, along with many local agencies/services attend the afternoon session.
- Each service provided a summary of their work, target group, location and staff. It was hugely informative for school staff who also introduced themselves to each service. It placed people and services on a familiar footing to assist in communication should the need arise in the future.
- An inventory providing information and contact details of local services and school staff was drafted, by Claire O'Toole[5], and distributed to all who attended the event to enable clearer pathways of referral. This was received with great praise as a helpful piece of work and information sharing.

Members of the Steering Group reported that the networking event organised as part of the pilot project was helpful: *"meeting with agencies in the KDYS was very valuable for the care-team. Putting a face to the name is very important. Teachers are more willing to participate in interagency in-service training".*

4.5 Support for Staff Mental Health & Well-Being

The whole School approach to mental health promotion focuses on promoting positive mental health for all members of the school community (DES et al. 2013 p.14). It is important, therefore, to support staff mental health and well-being to ensure that they have the space to reflect upon their own well-being as well as their attitudes to mental health. Providing professional development in relation to mental health was also essential to ensure staff have up-to-date knowledge and understanding of mental health and the supports available both for themselves and their students (DES et al. 2013). As the demands of the job of teaching are becoming more complex, providing support for staff well-being is essential. When staff feel their needs are being listened to and supports are put in place for them it further enhances not only their own well-being but the well-being of the school community as a whole.

To fulfil these objectives, as part of the pilot project, a staff well-being day was organised:

Collaborative Staff mental health afternoon – January 2016

- An afternoon was organised in early January, by the project worker, to support staff in looking after their own Mental Health and Well-being.
- Staff, in all three schools, were asked to make suggestions for an afternoon event to promote their own Mental Health and Well-being.
- The top five suggestions were then incorporated into the event. They included:
  1. Mindfulness
  2. Stress Management
  3. Voice Care
  4. Psychotherapy information on their professional journey

[5] Coordinator of the Children and Young People's Services Committee.

5. Work life balance
(Social outings and leisure and recreation events were also suggested)

Five local facilitators were sourced for the workshops to ensure all staff would have access to these professionals if they requested/required any follow up support post-event. These facilitators clearly understood the aims of the pilot project and were eager to engage with staff. The afternoon was attended by all staff members from the three schools and was also open to ancillary staff. Staff were given the option to attend one, of the five courses available, which they felt would be most beneficial to them. An evaluation form was completed by all staff who attended and findings suggest the workshops were extremely successful. As a result of the project, 50% of the staff reported that their *"mental health is promoted and prioritised"*. However, findings also reported that several staff members requested more workshops and/or that their preference would be for a longer day to promote their own mental health and well-being.

4.6 Policies updated to support the Mental Health of Students and Staff

According to the DES et al. (2013 p.10), *"actively implementing school policies related to mental health is an important protective factor in the school environment which helps to build resilience in young people"*. The Whole-School Guidance Plan and the Pastoral Care / Student Support Policy were key in addressing structural supports within the three schools and allowed for the effective implementation of other policies to be updated and ratified by the Board of Management of each school involved. These include:

- The **SPHE & RSE Policies** were very well established and developed by the SPHE and other relevant staff involved in all three schools. However, as part of the project, the policies were reviewed and updated in each school in relation to whole-school planning and delivery. Included are requirements to incorporate a yearly plan for the Mental Health Week Programme in collaboration with the other two schools and relevant agencies where possible.

- The **Critical Incident Policy and Plan** includes support from the NEPS psychologists in all three schools, as well as, training for the SSTs in the area of Critical Incidents. It also includes team training for all staff to provide support and knowledge. The principals reported that *"all three schools have a Critical Incident Plan"*.

  A debrief team was set up by the project coordinator, in one school, in response to concerns that the SNA staff reported dealing with many daily stresses and challenging behaviours leading to individual crisis management of students. The team consisted of the school counsellor, SEN teacher and SNA staff and provided clear guidelines, supports and activities for the SNAs. It also enabled the SEN teacher to identify where each individual SNA needed support and what strengths they had, while also identifying individual student's needs. A voluntary monthly team support/debrief process was put in place in order to support the level of challenging behaviours and all SNA staff members attended each meeting.

  The SNA staff reported that their stress levels reduced significantly as a result of the programme and felt it was hugely successful for their own mental health and well-being. As a direct consequence, they felt the young people they worked with appeared to manage their behaviours more effectively.

- The **Anti-bullying Policy** was reviewed and updated with additional guidelines. Staff were also provided with training to ensure clarity and support in relation to effectively dealing with/eliminating bullying behaviour in their schools.

- The **Dignity at Work Policy** was reviewed to support staff in their workplace. As a result, the schools reviewed and updated the staff handbook and addressed the induction process for new staff to support them on their entry into the school environment and workplace.

- The **Healthy Eating Policy** was reviewed and updated in order to support young people's overall well-being and educate them in relation to their eating patterns. It also ensured, within the school environment, young people were offered healthy choices. This policy was promoted through the Home Economic and PE Departments with the aim of supporting healthy choices and healthy lifestyles which in turn supports the positive promotion of Mental Health.

The key to the successful implementation of these policies and plans lay in the strong leadership of each principal, the coordinated whole-school approach and the support and commitment of all staff and students involved in the delivery of the various programmes provided in each school throughout the year. As part of the staff survey 51% of staff reported they are "*often*" or "*always*" involved in policy review process. While there is room for improvement, this can be facilitated through continued school staff self-evaluation processes in relation to the implementation of mental health related policies and practices.

4.7 Agencies involved in the Pilot Project 2015/2016 and relevant programmes they delivered

- **KDYS** – Sexting workshops, internet safety workshops for staff, students and parents. Safe and appropriate relationships, LGBT issues in schools also.
- **AWARE** – Life and Coping skills programme and 'Beat the blues' programme for senior cycle students in each school.
- **SWCC** – One to one referral for counselling for students and RSE workshops for students.
- **NEPS** – Critical Incident Policy and planning, staff training in CI work and also delivery of training to staff to facilitate the Friends for Life Programme.
- **FRC** – linking with families in need of support.
- **Kerry Life Education** – Self-esteem issues and self-care for young people and workshops with Junior Cycle students re mental health, stress management and much more.
- **Project worker** – anti-bullying policy work and guidance planning with staff and students.
- **KACS** – to refer students for one to one counselling.
- **CAMHS** – to refer students with very specific mental health issues including suicide ideation, referred through their GP.
- **Pieta House** – to refer students with suicide ideation for support and safety.
- **TUSLA** – Safe talk training for staff and also, self-harm awareness day training.
- **SPHE** – training offered to SPHE staff to support them in delivering the RSE programme to senior students.

5. FINAL REFLECTION - STRENGTHENING CONNECTIONS

All of the above work was undertaken, facilitated and embedded within the wider community of Killarney. The Project Steering Group and the School Principals were very mindful of the inter-connectedness of the three schools to each other, to the wider community of Killarney and to the services and supports available to the schools in Killarney and across County Kerry. A very good working relationship and sharing of practices between the three principals had been established before the project, as reported by the Steering Group there was "*a culture of working across the three schools",* which ensured the project was both possible and effective; the project enhanced and strengthened this and "*developed a sense of shared community and resources".* Every effort was made to strengthen connections:

- Within the school community i.e. between management, staff, students and parents;
- Across the three school communities i.e. through joint planning, collaborative events, shared training and learning;
- Outside the school communities i.e. with relevant agencies and support services.

The work and successes of the Killarney Schools Mental Health & Well-Being Pilot Project has required a considerable level of commitment from all stakeholders. The *"ambitious*" project's aims were achieved by collaboration across the three schools and by building connections with external agencies. As reported by the Steering Group "*the Killarney pilot provided an excellent opportunity for learning for both the participating schools and agencies".* The achievements are noteworthy but ongoing commitment is required to ensure the learning is embedded and sustained.

6. DISCUSSION/RECOMMENDATIONS

The success of the Killarney Schools Mental Health & Well-being Pilot Project is evident from the many objectives / achievements accomplished since beginning the project. As part of their whole-school approach to mental health promotion, the whole-school guidance plan was developed and is now available on each of the schools' websites for students, families, school staff and agencies to access at any time. In addition, all school policies related to mental health and well-being were also reviewed, updated and ratified by each school.

The schools have also re-structured their pastoral care / Student Support system and updated their Student Support plan/policy which is included in the whole-school Guidance Plan. The roles and responsibilities of each member of the SST are also more clearly defined. Furthermore, the SST have developed stronger links with external statutory and voluntary agencies, and all staff, in part, as a result of the networking afternoon, are now familiar with the relevant services. Moreover, as a result of the pilot project initiative, there are now clearer and easily accessible internal and external referral processes in place to support students with mental health concerns within the three secondary schools.

Another essential component of youth mental health promotion is the necessity to ensure young people's participation in relation to the planning and developing of the programmes, policies, activities and promotions. As part of the Amber Flag Initiative, Youth Mental Health Teams were successfully set up.

The whole school approach to mental health promotion focuses on promoting positive mental health for all members of the school community (DES et al. 2013 p.14). As a result of the project, the three schools now support and encourage staff to reflect upon their own mental health and well-being and have sourced local agencies to provide additional support to staff if required. This is not only beneficial for staff but for students and the whole school environment also. Although this pilot project has been extremely successful, from the schools' perspective, this is only the beginning. As the Steering Group reported there will continue to be "*a needs-analysis and shared vision, driven 'top down' and 'bottom up' from students, teachers and parents*". The aim for the future is to introduce several more initiatives to build upon, and continue to improve, the mental health and well-being of their students.

Key Findings:

- Prioritising the Whole-School Guidance plan and Mental Health Policies that underpinned the work was crucial and took time to implement effectively. It involved collaboration and promoted collegiality and a positive environment for all.
- Supporting and structuring the Student Support Team, and clearly defining roles with a shared leadership, was vital for the efficiency and effectiveness of any mental health and well-being programmes that followed.
- Providing a greater awareness and appreciation of the services and the roles they play for young people in the community was essential for positive working relationships across the sector.
- Strengthening the school and community links through the formal meeting with agency and school staff, and providing a handbook about agency and school staff, was a significant piece of work. As a result, school staff now have a clearer understanding of the roles and responsibilities of, and have developed stronger relationships with, external agencies. Information on external services is essential for schools in order to provide effective referrals and gather information that is necessary for some cases within the school.
- The sharing of information across the three schools was very beneficial for all three schools and developed a broader sense of community.
- Strong leadership, from the Principals, the Guidance Counsellors, the Project worker and the Youth Mental Health teams was vital for the success of the programme and its future sustainability.
- The partnership and involvement of staff, who may not have had the opportunity previously to get involved, was crucial for the sustainability of the programme. Providing for and acknowledging the self-care and support required by staff in relation to their own mental health and well-being was extremely beneficial not only to staff, but to the entire school community.
- Findings from the questionnaires completed by students, families and staff highlighted the areas that are working well and key issues that still need to be work on.
- Schools' reported that the mental health and well-being of staff is promoted and SST and Critical Incident policies are established. Students' reported that they knew who to "*go to*" if they need support. In addition, parents reported being "informed about mental health well-being programmes" and are "*comfortable*" talking with their child's teacher regarding their children's well-being. Furthermore, the Steering group commented that mental health policies were prioritised, that "*without the initiative would not have been completed*". Areas of improvement include parental participation, continued development of the SST and also the identification of a key person to maintain the well-being collaboration across the three schools in place of the pilot project coordinator.

Secondary Outcomes:

- Improved communication between the three schools
- Staff from the three schools are more familiar and comfortable with one another
- Shared thinking in dealing with cross school incidents (bullying, pornography, anti-social behaviour and misuse of social media)
- Regular meetings of three principals which led to further collaboration including:
    - Combined teaching and learning projects
    - Shared calendar, timetable and subject options
    - Second year awards scheme
    - Shared Transition Year (TY) activities and fundraisers
    - Shared Debs planning
    - Collaboration between parent councils
- Sharing of resources and expertise
- Improved transition programme development
- Soothing and Sorting afternoon for 6th year students (March 2017)

Challenges

- Lack of time / role conflict: The role of a Principal is primarily the day to day management of the school. The Principal controls the internal organisation, management and discipline of the school, including the assignment of duties to members of the teaching and non-teaching staff. The Principal reports to the Board of Management. While SST structures and supports are essential to the well-being of the whole school community there is no allowance from the DES for SST Coordination Posts. The time required to ensure this project was successful and effective was additional to already busy and stretched schedules. This is true for all stakeholders in the project but in particular the Principals.
- The role of the principal was not identified initially as core to the mental health project, but it was critical.
- Lack of training in the mental health area even for recent graduates of teacher training colleges. Skill set of current staff needs significant investment.
- Constraints of school timetable to facilitate meetings and or appropriate planning.
- As the Steering Group reported "*parental participation is an ongoing challenge and remains a challenge despite the three schools working together to enhance it*"
- Unclear how the project can be sustained in the long-term without a coordinator as the schools are very busy.

Recommendations for Future Projects:

- To set clear and achievable targets each year. As the school principals report "*bite off something small and have clear goals each year*".
- At the beginning of each school year, the Mental Health plan for each year-group must be included in the Whole-school Guidance Plan. This provides a shared vision particularly as a result of the consultation with staff, student, parents and agencies.
- To ensure student participation, suggestions and ideas are encouraged, valued and incorporated in the development of any plans or programmes for the year as their input and energy is a crucial component of effective well-being work.

- In keeping with the specifications of the new Junior Certificate, to create an advisory panel for each school in order to provide consistent mental health and well-being programmes for both the Junior and Leaving Cert Cycles.
- To maintain strong leadership from management and a commitment of collaboration and support.
- To allocate a lead person from each school to collaborate across the schools.
- To develop a needs-analysis and shared vision for each school, driven top down and also bottom up by students, teachers and parents.
- To continue to build on the community links which now exist. The Steering Group view this as a "*crucial step, as without close ties and pathways to engage community resources and supports the overall success of the project becomes limited*".
- To invite external agencies to participate in SST meetings on a regular basis to ensure schools continue to strengthening relationships with the agency staff and vice versa.
- Source financial and administrative resources needed to ensure the vision and its aims are realised.
- To maintain and expand the Steering Group, perhaps with new staff and members to lead the programme going forward and to meet once per term.
- To continue to work with all partners including the Parent Councils to increase parental participation. As the Steering Group recommend it is important to "*acknowledge and include parents in the process of understanding youth mental health to support schools in supporting students*".
- This programme provided a starting point. However, several more initiatives could improve the well-being of our students through pooling resources, increased networking and sharing knowledge between the schools and relevant agencies, families, staff and students.
- Establish agreed communication protocols with external agencies regarding shared students of concern.
- The project was made possible because of the established, good working relationship between all three school principals. This is an essential starting point for similar projects to be established in other areas.

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APPENDIX A: PILOT PROJECT QUESTIONNAIRES

Students Survey 2015 - Mental Health & Well-Being Survey

	Criteria	Rate	Rate	Rate	Rate	Rate	Other
Area of Review	**Areas to assist our work**	**1 (Low)**	**2**	**3**	**4**	**5 (High)**	**What can we do to improve it? Areas for improvement**
1.In-School Supports	I know the support staff (Pastoral Care Team) within my school						
	The mental health and well-being of students is promoted and prioritised in my school.						
	The students have a say in how the students are looked after in relation to their mental health and well-being						
	The SPHE classes deal well with emotional and mental health issues for students						
	I am informed in relation to issues such as bullying, coping skills and safety supports in the school and the school is active in addressing these issues for all students						
	I feel safe and supported in my school						
	I am happy with my school life						
	There are plenty of activities to do within the school life /day which are healthy and active						
	I know who I can go to if I need support in my school and know I would be helped if I was stressed						
	All staff contribute to the mental health and well-being of students						
	I can share my worries with staff in the school knowing that they will help me or find help for me						
2. External School Supports	My school communicates with other supports outside the school to help students						
	Outside agencies give talks to students on a regular basis that is relevant and supportive to different class groups at different times during the year						
	I am happy knowing where to go outside of school if I need additional supports for my overall mental health and well-being						
	The school makes me aware of these services for young people in the community						

	It is easy to go to other services in the community for help						
	Respectful relationships between staff and students are supported and flourish within the whole school environment						
Partnership with parents / guardians and staff	There are positive relationships between staff and students and parents in my school						
	Parents are informed of the additional activities to the curriculum e.g. talks, outings etc.						
	Students, staff and parents are familiar with the supports students have for their mental health in the school						
	There are structures within the school that allows students to be heard and that they have a voice in the well-being of students within the school						
	The mental health and well-being of students is encouraged and promoted in my school						
	Parents are welcomed to actively participate in student school life						
	The student council is very active in my school and represents my concerns and ideas that would help support students mental health issues						

Any other comments regarding how your school supports students' mental health and well-being;

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Parent Survey 2015 – Mental Health & Well-Being Survey

	Criteria	Rate	Rate	Rate	Rate	Rate	Other
Area of Review	**Areas to assist our work**	**1 (Low)**	**2**	**3**	**4**	**5 (High)**	**What can we do to improve it? Areas for improvement**
1.Internal School Supports	The mental health and well-being of students is promoted and prioritised.						
	The school's culture and values reflect practices that we know promote student wellbeing.						
	We are able to access resources from the school about relevant mental health and well-being topics for our children.						
	We are aware of the services and programmes that our child can access through the school curriculum and the school community.						
	Our child has access to guidance / counselling and support at school for their overall well-being.						
	We are informed about school activities and mental health well-being programmes within the school year / programme delivered by the school						
	We are aware of the Pastoral Care Team and their role within the school support system for the students						
	We feel comfortable talking with our child's teachers about any concerns we have about his/her overall mental health and wellbeing.						
	We have a positive relationship with the teachers and leadership team at our child/ren's school.						
2. External School Supports	Our children are made aware by the school of the external supports they have in the community if they need support for their mental health and well-being						
	The school makes us aware of the services in the community that are available to our children to support them in their mental health and well-being.						
	External services come into the school to give talks to our children on the different services available to them						
	It's easy to access alternative support services for our children						

	The school provides information on external support services for individual children where necessary and help them with their parents to access these supports						
	The school maintains good links with other agencies for the well-being of our students / children						
Partnership with parents and staff	We feel welcomed at our child/ren's school, we are valued and our opinion counts.						
	There is a good flow of communication between home and school: we share information that affects our child's wellbeing with his/her teachers and teachers share information with us.						
	Parents are aware of what the SPHE (Social Personal & Health Education) programme is in the school curriculum						
	We are actively involved in the development of strategies that improve students wellbeing.						
	The school consult with parents regarding any concerns they have regarding the mental health of their students						
	Policies and procedures are easily accessible to parents						
	We are involved in developing joint strategies to enhance our child's wellbeing.						
	There are structures within the school that allows parents to be heard and have a voice in the well-being of students within the school						

Any other comments regarding how your school supports students mental health and well-being;

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Staff Survey 2015 – Mental Health & Well-Being Survey

	Criteria	Rate	Rate	Rate	Rate	Rate	Other
Area of Review	**Areas to assist our work**	**1 (Low)**	**2**	**3**	**4**	**5 (High)**	**What can we do to improve it? Areas for improvement**
1.Internal School Supports	Our Pastoral Care team consists of management, guidance counsellor, Year Heads and Learning Supports teacher						
	The Pastoral Care team is supported in its role						
	The school has a yearly SPHE programme plan and the staff team aware of this and have input into this plan						
	The staff team is aware of the Critical Incident Management Policy & plan in action, the child protection policy and procedures and the anti-bullying policy and procedures						
	Policies are reviewed regularly by the staff team						
	The staff team are encouraged and supported in continual professional development						
	All staff contribute to the mental health and well-being of students						
	The school accommodate students within a physically safe environment						
	The mental health and well-being of students is promoted and prioritised						
	The mental health and well-being of staff is promoted and prioritised						
2. External School Supports	The Pastoral Care team has developed good links with external agencies involved in supporting the mental health of students						
	The Pastoral Care team have clear Referral procedures that all staff are aware of and utilise with ease						
	The school has a system in place to gather information on incoming students supported by the NEPS team on an ongoing basis						
	Roles and expectations of external agencies are clearly negotiated and defined						
	Planning re external training (e.g. CPD) is incorporated into the timetable for staff and students						

	There is clear communication to and from external agencies regarding supporting student mental health						
	Respectful relationships are supported and flourish within the whole school environment						
Partnership with parents and staff	The Pastoral Care Team and their roles are clearly defined for families / guardians, students and staff						
	Students, staff and parents are familiar with the workings of the pastoral team						
	The Pastoral Care team consult with parents and students regarding any concerns they have regarding the mental health of their students						
	Policies and procedures are easily accessible to staff and parents where appropriate						
	New staff members have opportunity for induction in relation to policies and procedures in place						
	Teachers are supported in delivering the SPHE programme and supported by external agencies where appropriate						
	There is a good Staff morale with positive working relationships						
	Staff are aware of the supports that are available to them to support them in the workplace and that they are easily accessible						
	There are structures within the school that allows students to be heard and that they have a voice in the well-being of students within the school						

Any other comments regarding how your school supports students mental health and well-being;

_____

_____

_____

1. **What is your role?**
   - ◯ School Principal
   - ◯ External Agency

Steering group follow up 2017 KSMHP CYPSC

The Objectives of the Killarney Schools' Mental Health pilot project

2. Do you think the main objectives of the Killarney Schools' Mental Health Project have continued under the following headings?

	Always	Often	Sometimes	Never	Don't know
Pastoral Care Team's/ Student Support Team's structure continues?	◯	◯	◯	◯	◯
Policies and procedures on mental health and wellbeing are provided and implemented?	◯	◯	◯	◯	◯
Partnerships with students, staff and parents on mental health and wellbeing continue?	◯	◯	◯	◯	◯
Community and external agency links continue?	◯	◯	◯	◯	◯

Other (please specify)

3. How do you think the main objectives of the projects have been maintained?

1.Pastoral care structures

2.Polices and procedures for mental health

3. Partnerships parents, school and students in terms of mental health

4.Community links

4. Now one year on, what do you think the main outcomes were of the project? What has remained as a result of the project?

1.

2.

3.

4

5. Now one year on, what outcomes of the project have not been maintained and why?

1.

2.

3.

4

6. What learning or recommendations would you suggest for the future of the Killarney Schools' MH project?

1

2

3

4

7. Any other comments?

APPENDIX B: THE AMBER FLAG INITIATIVE

The Amber Flag Initiative Promoting Positive Mental Health in Schools, Clubs and Society.

(edited from: http://www.careersnews.ie/wp-content/uploads/2013/09/Amber-Flag-Booklet.pdf.)

The Amber Flag Philosophy

The **Amber Flag** initiative aims to encourage Schools/Colleges/Clubs/Societies/Organisations to promote and actively bring about a culture change in the promotion of positive mental health within the educational system and other organisations. It is to enhance the already good work that is going on where mental health is concerned by offering an award.

Positive Mental Health aims to:

A. Promote mental health and well-being for all.

B. Prevent mental health problems through increasing awareness, social support, reducing risk factors such as racism, bullying and isolation.

C. Improving quality of life for students/people with mental health problems by promoting recovery through awareness and education.

The *Amber Flag* Initiative Promoting Positive Mental Health in Schools, Clubs and Society

Amber Flag Achievement Steps for Schools

1. The school must establish an Amber Flag **Project Team**. This can be done by election or volunteering. This team should comprise a cross-section of the school community but the majority must be students. One staff member shall be named as the **Coordinator** of the Amber Flag initiative. The terms of reference of the team should be to promote Positive Mental Health in the school and should take cognisance of roles already in existence in the school that may have an involvement in this area. Professionals such as Guidance Counsellors and SPHE teachers have an invaluable role to play in such matters and should be consulted prior to the formation of the committee. Try to involve representatives from as many stakeholders as possible. It is up to each school to decide how the team shall operate. Records of meetings shall be kept for evidence of the work of the team.

2. Once constituted the team shall prepare an **Audit** of the activities and services in the school that promote an ethos of Positive Mental Health.

3. The team should then identify **3 goals/tasks** to enhance the existing educational provision and support structures in the area of mental health promotion in the school. These should be achievable in the duration of one school year. A Mental Health Awareness Day must be included as one of the 3 goals. This could be a fixed date each year and could be used to include the wider community as well as those within the school.

4. Once the goals have been agreed an **Application** for the Amber Flag may be made using an Amber Flag Application Form. The team must then carry out its 3 goals over the school year. Towards the end of the school year a presentation of the Amber Flag will take place.

5. New members should be encouraged to join the team at the beginning of each school year and the new team shall outline its 3 goals/tasks for the next school year.

Amber Flag Project Ideas for Schools

The best ideas often emerge from the team itself but the following are some popular ideas.

1. Establish an Amber Flag notice board. This should contain the Amber Flag logo.

2. Publish newsletter or use part of an existing newsletter to promote Amber Flag activities.

3. Organise a Positive Mental Health Seminar in your school or organise for a year group to attend a seminar such as MentaliTY. (MentaliTY is a seminar organised by Suicide Aware for Transition Year groups throughout the country).

4. Organise a fundraiser/awareness day for Suicide Aware. This can be used to generate awareness of the Suicide Aware Contact details, email addresses and 24-hour helpline.

5. Establish a school Mentoring system where 5th Year students mentor 1st Year students.

6. Develop a project idea to be carried out in SPHE or Transition Year.

7. Design a Poster Competition promoting the Amber Flag ideals and the 24-hour Helpline phone number. Slogans might include *A Problem Shared is a Problem Halved*, *Talk is Cheap – But Priceless, Don't Leave Town Alone, A Healthy Body is a Healthy Mind, Sport – not just a Game,* and so on.

8. Devise a Mental Health Policy for your school.

9. Compose a Rap on Positive Mental Health. A rapping competition could be held.

10. Compose a 30 second radio advert on the theme of Mental Health.

11. Put on a Play/Drama in your school/community.

Get some publicity in the local press. Regular articles or photos of completed projects. Representatives from Suicide Aware are always willing to attend for presentations etc.

APPENDIX C: ROLES & RESPONSIBILITIES OF MEMBERS OF THE STUDENT SUPPORT TEAM[6]

The Coordinator

This role may be rotated and the person is responsible for:

- Organising and collating the referrals made to the team
- Liaising, prior to the meetings, with any additional attendees and arranging for relevant Year Heads / Teachers to be present
- Working closely with the Principal / Deputy Principal on any issues of concern
- Briefing any 'extra' attendees about issues and procedures
- Ensuring appropriate documentation is circulated
- Making appropriate referrals or allocating the task to another person
- Liaising with relevant agencies and if appropriate, with parents / guardians
- Providing structured feedback to those agencies
- Convening and chairing case meetings or arrange for someone else to chair
- Ensuring relevant staff are kept informed of appropriate decisions / actions
- Providing support in the development of criteria for monitoring the operation of student support system
- Recording of the meetings

The Guidance Counsellor / The school counsellor / Home school Liaison/ The Chaplain;

These individuals strive to ensure that pastoral care is a day to day reality for all students and may:

- have detailed information on particular students
- agree to provide on-going support or specific interventions to individual students
- support subject teachers in their work
- liaise with outside agencies
- be a contact for parents / guardians who have concerns about their children within and outside of school hours

The SPHE Coordinator:

- Will attend meetings periodically and will, through the SPHE curriculum, work with the Year Head / Class Teachers
- Will provide feedback from the SPHE teachers in relation to issues arising within different class groups
- May be required to provide input on a range of topics related to school issues as they arise and organise talks for student well-being relating to these areas of concern
- Address preventative programmes within the curriculum

[6] This information was taken directly from *Student Support Teams in Post-Primary Schools: A Guide to Establishing a Team or Reviewing an Existing Team* (NEPS 2014).

The Year Head / Class Teachers:

- Will collate information from teachers in relation to particular students, issues and events
- Will provide a clear role in the behavioural programme of students and meet regularly to discuss issues relevant to them
- May be required to give feedback to individual staff
- May make contact with parents / guardians
- May liaise with the class teachers, the guidance counsellor and/or other professionals
- May be available to monitor and support individual students
- Will be provided with on-going professional development opportunities
- Will be accessible to subject teachers students and parents when required

The co-ordinating teacher for Special Needs Education:

- Will have specialised information on students with additional needs
- Can advise on the appropriateness of supports for particular students
- Will provide feedback in relation to the work being done with specific students and particular areas of concern

APPENDIX D: SUMMARY OF ACHIEVEMENTS[7]

Policies:

- Critical incident policy renewed and presented to staff in each school
- Anti-Bullying Policy
- SPHE Policy
- RSE Policy
- Student Support Policy
- Whole School Guidance Plan Developed

Student Support Team:

- Clear and improved Structure
- Individual Roles identified
- Note-taking
- Communication to staff, parents and teens
- Clear referral pathways

Student Participation:

- Youth Mental Health Team formed
- Amber Flag project
- Amber Flag attained leading to celebratory afternoon
- RSE workshops

Staff Development:

- Focus on staff well-being
- Communication policies
- Successful well-being afternoon for staff of the three schools
- NBSS engagement

Community Links

- Introductory meet and great afternoon
- Agencies invited to meet Student Support Team
- Handbook created which provides information relating to agencies, their roles and the relevant contact person

[7] This information was taken directly from the Pilot Project presentation by Niamh Mulligan (Coordinator).

Parental Involvement:

- Parents completed pre and post project survey
- Combined parent talks
- Guest speakers

Research:

- Evaluation survey completed by students, parents and staff and the project steering group as part of the project.