



Cabot Learning Federation

MENTAL HEALTH & EMOTIONAL WELLBEING POLICY

Date Approved: May 2023 Approved By: Academy Council Review Frequency: 3 years Date of Next Review: January 2026

History of most recent Policy changes

Date	Page	Change	Origin of Change e.g. TU request, Change in legislation
Date	E.g. Whole Document	Detail of change	Reason for change
January 2023	Whole document	New policy	
May 23	Whole document	Academy Council review	

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1 Policy Statement

At John Cabot Academy we are committed to promoting positive mental health and emotional wellbeing to all students, their families and members of staff and Academy Councillors. Our open culture allows students' voices to be heard, and through the use of effective policies and procedures we ensure a safe and supportive environment for all affected - both directly and indirectly - by mental health issues.

2 Scope

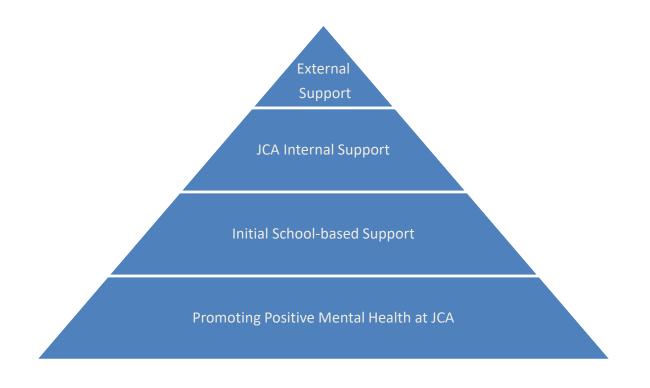
This policy is a guide to all staff – including non-teaching and Academy Councillors – outlining John Cabot Academy's approach to promoting mental health and emotional wellbeing. It should be read in conjunction with other relevant Academy policies.

3 Policy Aims

- Promote positive mental health and emotional wellbeing in all staff and students.
- Increase understanding and awareness of common mental health issues.
- Enable staff to identify and respond to early warning signs of mental ill health in students/ staff.
- Enable staff to understand how and when to access support when working with young people with mental health issues.
- Provide the right support to students with mental health issues, and know where to signpost them and their parents/carers for specific support.
- Develop resilience amongst students and raise awareness of resilience building techniques.
- Raise awareness amongst staff and gain recognition from SLT that staff may have mental health issues, and that they are supported in relation to looking after their wellbeing; instilling a culture of staff and student welfare where everyone is aware of signs and symptoms with effective signposting underpinned by behaviour and welfare around the Academy.

4 School Vision

JCA SEMH Support Pathway



See Appendix D for futher informaition

5 Key staff members

This policy aims to ensure all staff take responsibility to promote the mental health of students, however, key members of staff have specific roles to play:

- Pastoral Staff
- Designated Safeguarding Lead/Deputy Safeguarding Lead
- SENCO
- PSHE Coordinator

If a member of staff is concerned about the mental health or wellbeing of student, the Academy's safeguarding procedures should be followed.

If the child presents a high risk medical emergency, relevant procedures should be followed, including involving the emergency services if necessary.

6. Teaching about mental health

The skills, knowledge and understanding our students need to keep themselves - and others - physically and mentally healthy and safe are included as part of our PSHE curriculum.

We will follow the guidance issued by the PSHE Association to prepare us to teach about mental health and emotional health safely and sensitively.

https://www.pshe-association.org.uk/curriculum-and-resources/resources/guidancepreparingteach-about-mental-health-and emotional wellbeing

Incorporating this into our curriculum at all stages is a good opportunity to promote students' wellbeing through the development of healthy coping strategies and an understanding of students' own emotions as well as those of other people.

Additionally, we will use such lessons as a vehicle for providing students who do develop difficulties with strategies to keep themselves healthy and safe, as well as supporting students to support any of their friends who are facing challenges. See Section 13 for Supporting Peers

7. Signposting

We will ensure that staff, students and parents/carers are aware of the support and services available to them, and how they can access these services.

Within the Academy (noticeboards, toilets etc.) and through our communication channels (newsletters, websites), we will share and display relevant information about local and national support services and events.

The aim of this is to ensure students understand:

- What help is available
- Who it is aimed at
- How to access it
- Why should they access it
- What is likely to happen next

5.1 8. Warning Signs

Staff may become aware of warning signs which indicate a student is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously and staff observing any of these warning signs should alert the DSL and pastoral teams by following the Academy's safeguarding procedures.

Possible warning signs, which all staff should be aware of include:

- Physical signs of harm that are repeated or appear non-accidental
- Changes in clothing e.g. long sleeves in warm weather
- Changes in eating / sleeping habits
- Abusing drugs or alcohol
- Expressing feelings of failure, uselessness or loss of hope
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood
- Secretive behaviour
- Lowering of academic achievement
- Skipping PE or getting changed secretively
- Talking or joking about self-harm or suicide
- Lateness to, or absence from the Academy
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

5.2 9. Targeted Support

We recognise some children and young people are at greater risk of experiencing poorer mental health. For example, those who are in care, young carers, those who have had previous access to CAMHS, those living with parents/carers with a mental illness and those living in households experiencing domestic violence.

We ensure timely and effective identification of students who would benefit from targeted support and ensure appropriate referral to support services by:

- Providing specific help for those children most at risk (or already showing signs) of social, emotional, and behavioural problems;
- Working closely with both Bristol and South Gloucestershire Local Authority CAMHS and other agency services to follow protocols including assessment and referral;

- Identifying and assessing children who are showing early signs of anxiety, emotional distress, or behavioural problems;
- Discussing options for tackling these problems with the child and their parents/carers where appropriate;
- Providing support to access a range of interventions that have been proven to be effective,

A summary of the options of how a student can access 1:1 mental health support?

What it is	Who it is suitable for	How it is accessed
Kooth provide free online emotional and mental health support to young people	All students	www.kooth.com
Thrive app for the prevention, early detection and self-management of our students' mental health	All KS4 students	https://thrive.uk.com/
CAMHS provide specialist support for mental health	All students	www.oxfordhealth.nhs.uk/childr en-and-young-people/
Off the Record provide a range of free services including counselling, listening support, youth participation, advocacy and specialist groups, support for care leavers and a LGBT+ focused youth group	All students	www.otrbristol.org.uk 0808 808 9120 hello@otrbristol.org.uk
School nurses provide health related support, advice and treatment to school age children and their families in a variety of settings School counsellor and Mental Health Support Worker	All students	Students can speak to the appropriate Student Support Leader to get an appointment to speak to the school nurse, counsellor and MHSW.
Childline	All students	Childline is here to help anyone under 19 in the UK with any issue they're going through. You can talk about anything. Whether it's

		something big or small, our trained counsellors are here to support you. Childline is free, confidential and available any time, day or night. Call 0800 1111
The Samaritans	All Students	Contact a Samaritan – if you need someone to talk to and to listen. They won't judge or tell you what to do. Call them any time, day or night. Call for FREE on 116 123

5.3 10. Managing Disclosures

If a student chooses to disclose concerns about themselves, or a friend, to any member of staff, the response will be calm, supportive and non-judgemental.

All disclosures should followed up using the Academy's safeguarding procedures and be recorded confidentially on CPOMS, including:

- Date
- Nature of the disclosure & main points from the conversation
- Name of member of staff to whom the disclosure was made
- Agreed next steps for the pastoral or safeguarding teams

5.4 11. Confidentiality

If a member of staff feels it is necessary to pass on concerns about a student to either someone within or outside of the Academy, then this will be first discussed with the student. We will tell them:

- Who we are going to tell
- When we're going to tell them
- What we are going to tell them
- Why we need to tell them

Ideally, consent should be gained from the student first, however, there may be instances when information must be shared, such as students up to the age of 16 who are in danger of harm.

It is important to also safeguard staff emotional wellbeing. By sharing disclosures with a colleague this ensures one single member of staff isn't solely responsible for the student. This also ensures continuity of care should staff absence occur and provides opportunities for ideas and support.

Parents/Carers must always be informed, but students may choose to tell their parents themselves. If this is the case, a timescale will be agreed with the Designated Safeguarding Lead to share this information before the Academy makes contact with the parents/carers. Gillick competency will be applied in the appropriate circumstances for a student.

If a student gives us reason to believe that they are at risk, or there are safeguarding issues, parents/carers should not be informed, but the safeguarding procedures should be followed.

5.5 12. Whole Academy Approach

12.1 Working with Parents/Carers

If it is deemed appropriate to inform parents/carers there are questions to consider first:

- Can we meet with the parents/carers face-to-face?
- Where should the meeting take place some parents are uncomfortable in the Academy premises so consider a neutral venue if appropriate.
- Who should be present students, staff, parents/carers etc.?
- What are the aims of the meeting and expected outcomes?

We are mindful that for a parent/carer, hearing about their child's issues can be upsetting and distressing. They may therefore respond in various ways which we should be prepared for and allow time for the parent/carer to reflect and come to terms with the situation.

Signposting parents to other sources of information and support can be helpful in these instances. At the end of the meeting, lines of communication should be kept open should the parents have further questions or concerns. Booking a follow-up meeting or phone call might be beneficial at this stage.

Ensure a record of the meeting and points discussed/agree are added to CPOMS.

12.2 Supporting Parents/Carers

We recognise the family plays a key role in influencing children and young people's emotional health and wellbeing; we will work in partnership with parents and carers to promote emotional health and wellbeing by:

- Ensuring all parents/carers are aware of and have access to promoting social and emotional wellbeing and preventing mental health problems;
- Highlighting sources of information and support about common mental health issues through our communication channels (website, newsletters etc.);
- Offering support to help parents/carers develop their parenting skills. This may involve providing information or offering small, group-based programmes run by community nurses (such as school nurses and health visitors) or other appropriately trained health or education practitioners.

5.6 13. Supporting Peers

When a student is suffering from mental health issues, it can be a difficult time for their friends who may want to support but do not know how. To keep peers safe, we will consider on a case by case basis which friends may need additional support. Support will be provided in a one to one setting and will be guided by conversations by the student who is suffering and their parents with whom we will discuss:

- What it is helpful for friends to know and what they should not be told
- How friends can best support
- Things friends should avoid doing / saying which may inadvertently cause upset
- Warning signs that their friend needs help (e.g. signs of relapse)

Additionally, we will want to highlight with peers:

- Where and how to access support for themselves
- Safe sources of further information about their friend's condition
- Healthy ways of coping with the difficult emotions they may be feeling

5.7 14. Supporting Staff

The Academy is committed to supporting staff who are either suffering with their own mental health issues or dealing with mental health issues/disclosures by way of supervision.

All Academy employees have access to:

- The Mental Health & Wellbeing Guidance Document
- The Thrive App
- The CLF Wellbeing website
- The EAP

The Employee Assistance Programme (EAP). The EAP is a 24/7 confidential helpline (0800 030 5182) for CLF colleagues to access support on a wide range of lifestyle matters including stress and anxiety issues, financial information and legal advice, relationship advice, child care support, tax information, legal advice, housing concerns, retirement and bereavement.

Where more in-depth emotional support is required, the service offers individual telephone or face to face counselling sessions, which can be arranged via the same confidential helpline number outlined above.

Line managers also have an important role to play in supporting staff that are experiencing mental health problems. This involves supporting employees in the workplace and supporting them back to work after a period of absence. Key areas to consider are:

- Opening up a conversation
- Making reasonable adjustments
- Completion of a Wellbeing Action Plan
- Return to work meeting

- Keeping in contact
- Therapeutic return, phased return and return to work plans

Line managers can have a huge impact on supporting their staff by communicating, listening, being open to adjustments, where required, and by providing support and signposting as necessary.

Everyone's experience of mental health is different and two people experiencing the same condition may have entirely different symptoms, signs, behaviours and coping mechanisms. It is therefore important not to focus on the diagnosis but on how it impacts.

While managers are not expected to be mental health experts, the measures highlighted above will help to support their members of staff. Managers can also seek support from the CLF HR team or from expert organisations such as:

- Samaritans
- Mind
- GP

5.8 15. Training

As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular safeguarding training to enable them to keep students safe. A nominated member of staff will receive Mental Health First Aid training or equivalent.

We will host relevant information on our website for staff who wish to learn more about mental health.

Training opportunities for staff who require more in depth knowledge will be considered as part of our professional development process and additional CPD will be supported throughout the year where it becomes appropriate due to developing situations with one or more students.

Where the need to do so becomes evident, we will host twilight training sessions for all staff to promote learning or understanding about specific issues related to mental health.

Suggestions for individual, group or whole Academy CPD should be discussed with SLT Line Managers, who can also highlight sources of relevant training and support for individuals as needed.

Appendices

Appendix A: Furter information and souces of support about common mental health issues

5.9

5.10 1. Prevalence of Mental Health and Emotional Wellbeing Issues

- 1 in 10 children and young people aged 5 16 suffer from a diagnosable mental health disorder - that is around three children in every class.
- Between 1 in every 12 and 1 in 15 children and young people deliberately selfharm.
- There has been a big increase in the number of young people being admitted to hospital because of self harm. Over the last ten years this figure has increased by 68%.
- More than half of all adults with mental health problems were diagnosed in childhood. Less than half were treated appropriately at the time.
- Nearly 80,000 children and young people suffer from severe depression.
- The number of young people aged 15-16 with depression nearly doubled between the 1980s and the 2000s.
- Over 8,000 children aged under 10 years old suffer from severe depression.
- 3.3% or about 290,000 children and young people have an anxiety disorder.
- 72% of children in care have behavioural or emotional problems these are some of the most vulnerable people in our society.

(Knightsmith, 2019)

1.1 Below, we have sign-posted information and guidance about the issues most commonly seen in school-aged children. The links will take you through to the most relevant page of the listed website. Some pages are aimed primarily at parents but they are listed here because we think they are useful for school staff too.

1.2 Support on all of these issues can be accessed via <u>Young Minds</u> (www.youngminds.org.uk), <u>Mind</u> (www.mind.org.uk) and (for e-learning opportunities) <u>Minded</u> (www.minded.org.uk).

5.11 2. Self-harm

- 2.1 The JCA Self Harm Policy can be accessed on the school website.
- 2.2 Self-harm describes any behaviour where a young person causes harm to themselves in order to cope with thoughts, feelings or experiences they are not able to manage in any other way. It most frequently takes the form of cutting, burning or non-lethal overdoses in adolescents, while younger children and young people with special needs are more likely to pick or scratch at wounds, pull out their hair or bang or bruise themselves.

2.3 Online support

<u>SelfHarm.co.uk</u>: <u>www.selfharm.co.uk</u>

National Self-Harm Network: www.nshn.co.uk

2.4 Books

Pooky Knightsmith (2015) *Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies*. London: Jessica Kingsley Publishers

Keith Hawton and Karen Rodham (2006) *By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents*. London: Jessica Kingsley Publishers

Carol Fitzpatrick (2012) A Short Introduction to Understanding and Supporting Children and Young People Who Self-Harm. London: Jessica Kingsley Publishers

5.12 3. Depression

Ups and downs are a normal part of life for all of us, but for someone who is suffering from depression these ups and downs may be more extreme. Feelings of failure, hopelessness,

numbness or sadness may invade their day-to-day life over an extended period of weeks or months, and have a significant impact on their behaviour and ability and motivation to engage in day-to-day activities.

5.12.13.1 Online support

Depression Alliance: https://www.depressionalliance.org/cbd-oil/

3.2 Books

Christopher Dowrick and Susan Martin (2015) *Can I Tell you about Depression?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers

4. Anxiety, panic attacks and phobias

Anxiety can take many forms in children and young people, and it is something that each of us experiences at low levels as part of normal life. When thoughts of anxiety, fear or panic are repeatedly present over several weeks or months and/or they are beginning to impact on a young person's ability to access or enjoy day-to-day life, intervention is needed.

4.1 Online support

Anxiety UK: https://www.anxietyuk.org.uk

4.2 Books

Lucy Willetts and Polly Waite (2014) Can I Tell you about Anxiety?: A guide for friends, family and professionals. London: Jessica Kingsley Publishers

Carol Fitzpatrick (2015) *A Short Introduction to Helping Young People Manage Anxiety*. London: Jessica Kingsley Publishers

5.13 5. Obsessions and compulsions

Obsessions describe intrusive thoughts or feelings that enter our minds which are disturbing or upsetting; compulsions are the behaviours we carry out in order to manage those thoughts or feelings. For example, a young person may be constantly worried that their house will burn down if they don't turn off all switches before leaving the house. They may respond to these

thoughts by repeatedly checking switches, perhaps returning home several times to do so. Obsessive compulsive disorder (OCD) can take many forms – it is not just about cleaning and checking.

5.1 Online support

OCD UK: http://www.ocduk.org/ocd/

5.2 Books

Amita Jassi and Sarah Hull (2013) *Can I Tell you about OCD?: A guide for friends, family and professionals*. London: Jessica Kingsley Publishers

Susan Conners (2011) *The Tourette Syndrome & OCD Checklist: A practical reference for parents and teachers*. San Francisco: Jossey-Bass

5.14 6. Suicidal feelings

Young people may experience complicated thoughts and feelings about wanting to end their own lives. Some young people never act on these feelings though they may openly discuss and explore them, while other young people do act and end their own life.

6.1 Online support

Prevention of young suicide UK – PAPYRUS: https://papyrus-uk.org/

6.2 Books

Keith Hawton and Karen Rodham (2006) *By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents*. London: Jessica Kingsley Publishers

Terri A.Erbacher, Jonathan B. Singer and Scott Poland (2015) *Suicide in Schools: A Practitioner's Guide to Multi-level Prevention, Assessment, Intervention, and Postvention.* New York: Routledge

5.15 7. Eating disorders

Food, weight and shape may be used as a way of coping with, or communicating about, difficult thoughts, feelings and behaviours that a young person experiences day to day. Some young people develop eating disorders such as anorexia (where food intake is restricted), binge eating disorder and bulimia nervosa (a cycle of bingeing and purging). Other young people, particularly those of primary or preschool age, may develop problematic behaviours around food including refusing to eat in certain situations or with certain people. This can be a way of communicating messages the child does not have the words to convey.

7.1 Online support

Eating Difficulties in Younger Children and when to worry: www.inourhands.com/eatingdifficulties-in-younger-children

7.2 Books

Bryan Lask and Lucy Watson (2014) *Can I tell you about Eating Disorders?: A Guide for Friends, Family and Professionals*. London: Jessica Kingsley Publishers

Pooky Knightsmith (2015) *Self-Harm and Eating Disorders in Schools: A Guide to Whole School Support and Practical Strategies*. London: Jessica Kingsley Publishers

Pooky Knightsmith (2012) Eating Disorders Pocketbook. Teachers' Pocketbooks

6

Appendix B: Guidance and advice documents

<u>Mental health and behaviour in schools</u> - departmental advice for school staff. Department for Education (2014)

<u>Counselling in schools: a blueprint for the future</u> - departmental advice for school staff and counsellors. Department for Education (2015)

<u>Teacher Guidance: Preparing to teach about mental health and emotional wellbeing</u> (2015). PSHE Association. Funded by the Department for Education (2015)

<u>Keeping children safe in education</u> - statutory guidance for schools and colleges. Department for Education (2021)

<u>Supporting pupils at school with medical conditions</u> - statutory guidance for governing bodies of maintained schools and proprietors of academies in England. Department for Education (2014)

<u>Healthy child programme from 5 to 19 years old</u> is a recommended framework of universal and progressive services for children and young people to promote optimal health and wellbeing. Department of Health (2009)

<u>Future in mind – promoting, protecting and improving our children and young people's mental</u> <u>health and wellbeing</u> - a report produced by the Children and Young People's Mental Health and Wellbeing Taskforce to examine how to improve mental health services for children and young people. Department of Health (2015)

NICE guidance on social and emotional wellbeing in secondary education

What works in promoting social and emotional wellbeing and responding to mental health problems in schools? Advice for schools and framework document written by Professor Katherine Weare. National Children's Bureau (2015)

Appendix C

The apps below can be used by students to support good wellbeing

<u>CALM</u>

App for Mindfulness and Meditation. (Available on iOS, Android & Web)

Breathe2Relax

The relaxation app trains you on the "belly breathing" technique that has proven benefits for your overall mental health. (Available on iOS and Android)

Stress Check by Azumio

This app takes you on a deep breathing exercise to promote calmness and can bring your heart rate down in five minutes. The app provides instant feedback with breath and pulse monitoring and tracks long-term progress. (Available on Android)

Happify

The Happify app is a way to make a game of all the positive psychology tricks you know might work, but make you feel kind of silly when you actually do them. You'll start by taking a quick test that assesses the areas of happiness you should work on. Then, you're presented with a few "tracks" that can help get you to your goals. (Available on iOS and Android)

SAMAPP: APPS FOR ANXIETY

SAM is an application to help you understand and manage anxiety. (Available on iOS and Android)

PACIFICA

Daily tools for stress, anxiety, and depression alongside a supportive community. Based on cognitive behavioural therapy & mindfulness meditation. (Available on iOS, Android & Web)

Thrive: Feel Stress Free

When you log in it gives you different tips to help you relieve stress/anxiety. There are tabs for meditation, deep relaxation, self-hypnosis, and more. (Available on iOS and Android)

BASE

An app designed to help manage stress and anxiety. By learning more about how and why we experience anxiety at different times and in different situations we can be less fearful. (Available on Android)

Smiling Mind

Trying to incorporate mindfulness into your daily life? This app can help you launch into a regular practice of mindfulness meditations. (Available on iOS and Android)

Wysa Happiness Chabot

Wysa helps to build emotional resilience by talking to you about your situation. Over 60 psychologists and 10,000 users have provided specific inputs to shape how Wysa helps them. (Available on iOS and Android)

I love Hue

When you feel like you have no control, this app can help sooth you by creating simple visual harmonies from mosaic tiles. (Available on iOS and Android)

Anxious Minds

Anxious minds are a charity that was set up by sufferers of anxiety and depression, to provide free support to all suffers of anxiety and depression. (Available on Android)

Worry Watch

This journaling tool has a simple user interface where users can log instances of worry, fear, and anxiety. They can also add the outcome of each situation, which provides a comparison between expectation and reality that helps reduce anxiety over time. (Available on iOS)

What's Up? Anxiety App

This app uses CBT and ACT (Acceptance Commitment Therapy) methods to help you cope with Depression, Anxiety, Anger, Stress and more. (Available on iOS and Android)

WELLMIND

WellMind is your free NHS mental health and wellbeing app designed to help you with stress, anxiety and depression. The app includes advice, tips and tools to improve your mental health and boost your wellbeing. (Available on iOS and Android)

<u>Cove</u>

Free, personal music journal to help you with your emotional and mental health. Trusted by the NHS. (Available on iOS)

Reflectly

A personal journal and diary driven by AI to enable you to deal with negative thoughts, make positivity louder and to teach you about the science of well-being. (Available on iOS and Android)

Happy not perfect

Backed by science, designed for you, Happy Not Perfect is your go-to place for everything you need to look after your mind in a fun new way. (Available on iOS and Android)

Appendix D - JCA SEMH Support Pathway

EXTERNAL Sup Referral to: CAMHS, and Support	oport for SEMH Social Care Assessment Multi-Agency Support	
CLF Alternat	tive Provision	
INTERNAL Suppo	rt for SEMH	7
School led early help assessment/plan (ind	cluding single/multi external agency)	
Educational Psy	ychologist	
Occupational T	Therapist	
Speech and Langua	age Therapist	
Thrive assessment a	nd action plan	
Education Mental Hea	alth Practitioner	
School Cour	nsellor	
 Off the Record	Sessions	· · · · · · · · · · · · · · · · · · ·
INITIAL Support	for SEMH	
Pastoral Support – Led by Staff who a		
School Nu		
Kooth (online	support)	
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7 Equalities Impact Assessment

[this section is mandatory and should be included for every new policy, or for an existing policy under review]

An Equalities Impact Assessment has been carried out. The assessment concluded that there was no adverse impact identified for any groups of people with protected characteristics / or / there was potential adverse impact identified for some groups of people with protected characteristics and mitigations are in place to reduce that impact. The full Equalities Impact Assessment Report can be obtained from [insert name of EIA author].

8 Reference to other relevant policies

(refer to any other CLF policies or HR guidance that is relevant)

9 Legislation or non-statutory guidance

(set out any legislation the policy relies on or refers to – this section can be removed if not applicable)

Heading 2 or numbered paragraph.

Heading 3 or numbered paragraph.

Normal text if preferred

10 Roles and Responsibilities

(this section is mandatory and should be included for every policy)

- 10.1 Board
- 10.2 Academy Council
- 10.3 Link Academy Councillor
- 10.4 Other board sub-committees
- 10.5 Executive Team
- 10.6 Principal
- 10.7 Operations Manager
- 10.8 (Any other key personnel such as DSL, SENCO etc)

11 Data Protection Implications

(this section should detail any particular DP considerations relevant to this policy)



11.1 Heading 2 or numbered paragraph.

Normal text if preferred

- 12 Heading 6
- 13 Heading 7 etc





Appendix One

Appendix as required.