THE PAINSLEY CATHOLIC ACADEMY

Painsley Catholic Academy

Youth Mental Health Information Booklet

For staff

The aim of the booklet is to ensure that staff are aware of the key guidance from Mental Health First Aid England. This includes; key signs and symptoms of mental health issues, the ALGEE action plan and useful websites for further information and support.

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Risk factors identified by wellbeing lead / safeguard lead and deputies / SENCO / Pastoral Leads and Education Welfare worker

Risk Factors include:

- Bullying by other students
- Domestic violence at home
- Ability to socialise
- Academic ability and not feeling clever enough
- Pressure to replicate other siblings
- LAC children
- Ethnicity
- FSM / PP
- Disadvantaged
- Family with alcohol misuse
- Dyslexia
- Learning difficulties
- ADHD
- Parents that do not engage with school
- Family members / friends who self-harm or have suicidal thoughts
- Bereavement
- Parents splitting up
- Behaviour of other siblings
- Past events / trauma

Depression

Depression affects emotions, thinking, behaviour and physical wellbeing. It impacts on individuals in different ways. Examples include:

Effects on emotions: sadness, anxiety, guilt, anger, mood swings, lack of emotional responsiveness, helplessness and hopelessness.

Effects on thinking: frequent self-criticism, self-blame, worry, pessimism, impaired memory and concentration, indecisiveness and confusion, tendency to believe others see you in a negative light, thoughts of death and suicide.

Effects of behaviour: crying spells, withdrawal from others, neglect or responsibilities, loss of interest in personal appearance and personal hygiene. , loss of motivation. Engaging in risk taking behaviours such as: reckless driving, self-harm, misuse of alcohol and other substances, risk-taking sexual behaviour. In severe depression, the young person often describes being emotionally blunted and 'beyond tears.'

Physical effects: chronic fatigue, sleeping too much or too little, overeating or loss of appetite, constipation, weight loss or gain, irregular menstrual cycle, unexplained aches and pains.

Key warning signs in school

- Show a decline in grades at school
- Be absent or arrive late more often
- Engage less in classroom discussions or appear to struggle to understand or communicate
- Struggle to work effectively in the morning but do better in afternoon classes
- Be more irritable and snappy with peers
- Avoid contact with peers and spend more time alone at lunch and breaks
- Engage in risk-tasking behaviour, displace safety issues, alcohol and drug misuse.

They may say or think things such as:

"I'm a failure"
"Life is not worth living"
"I have let everyone down."
"It's all my fault"
"Nothing good ever happens to me."
"I'm worthless"
"No-one loves me"
"I am so alone"
"Nothing will ever change."
"No-one can help me"

Anxiety Disorders

Anxiety can manifest itself in various ways; physical, psychological and behavioural.

Physical effects:

Cardiovascular – palpitations, chest pain, rapid heartbeat and flushing.

Respiratory – hyperventilation and shortness of breath.

Neurological – dizziness, headache, sweating, tingling and numbness.

Gastrointestinal – choking, dry mouth, nausea, vomiting and diarrhoea.

Musculoskeletal – muscle aches and pains (particularly neck, shoulders and lower back), restlessness, tremor and shaking.

Psychological effects:
- unrealistic and/or excessive fear and worry about past or future events.

- Mind racing or going blank
- Decreased concentration and memory
- Difficulty making decisions
- Irritability, impatience, anger
- Confusion
- Restlessness or feeling on edge and/or nervousness.
- Tiredness, sleep disturbances, vivid dreams.
- Unwanted unpleasant repetitive thoughts.

Behavioural effects:

- Avoidance of situations
- Repetitive compulsive behaviour e.g. excessive checking
- Distress in social situations
- Urges to escape situations that cause discomfort (phobic behaviour)

Key warning signs in school

At school a young person may:

- Be extremely well-behaved and quiet, fearful of asking questions.
- Demand extra time from teacher, asking questions constantly and required a lot of reassurance.
  - regularly fail to hand in work on time, due to either procrastination or perfectionism tendencies.
- Complain of sudden physical illness such as stomach aches and headaches, especially when exams or presentations are scheduled.
- Spend a lot of time on their own at lunch and breaks.
- Visibly appear to be anxious (sweating, agitated and rapid breathing)

Signs and symptoms of a panic attack

Panic attacks can begin suddenly and develop rapidly. The young person experiencing a panic attack often has a sense that something awful is going to happen to themselves or to others.

A young person having a panic attack will have several of the following symptoms at the same time:

- Increased awareness of heart beat
- Sweating
- Trembling or shaking
- Feeling of choking, shortness of breath or smothering
- Chest pain or discomfort nausea or abdominal distress
- Feeling of unreality or detachment from oneself or from one's surroundings.
- Feeling dizzy, unsteady, light-headed or faint.
- Fear of losing control or going crazy
- Fear of dying
- Numbness, tingling or pins and needles
- Chills or hot flushes

Eating disorders

Key warning signs in school

At school, a young person developing an eating disorder may:

- Avoid eating with friends, discard lunches or spend lunchtimes exercising.
- Appear more lethargic or struggle to concentrate on their schoolwork
- Not want to be involved in PE classes or get changed in front of people
- Alternatively, they may focus on PE to the point of obsession.

Anorexia nervosa

Emotional and psychological signs:

- Changes in character
- Obsessive concern about body weight, shape and dieting
- Extreme fear of gaining weight or of eating
- Unrealistic belief about being fat
- Marked distress around meal times
- Evidence of depression, anxiety and thoughts of self-harm
- Rigid 'black and white' thinking about food; labelling foods and 'good' or 'bad'.

Physical signs:

- In a young women, less or periods (or not starting to menstruate in young girls).
- Weight loss without any other illness that would account for it.
- In prepubescent children, puberty is delayed and growth and physical development are usually stunted.

Behavioural signs:

- Preoccupation with food, cooking for others.
- Becoming withdrawn
- Cutting out foods that were once enjoyed
- Excessive exercising
- Inducing vomiting (anorexia with purging)
- Avoiding meal times with others
- Excessively analysing food labels or counting calories
- Lying or evading questions about:
    - Types and amounts of food consumed
    - Exercising
    - Body shape and weight

Symptoms that indicate a medical emergency

- Disordered thinking and not making any reasonable sense (a person who is malnourished may appear to have psychotic symptoms such as disordered thinking, delusions or hallucinations)
- Disorientation; not knowing what day it is, where they are or who they are.
- Being sick several times a day.
- Fainting spells
- Collapsing or being too weak to walk.
- Painful muscle spasms.
- Chest pain or difficulty breathing.
- Blood in their bowel movements, urine or vomit.
- An irregular heartbeat or very low heart rate.
- Cold or clammy skin indicating a low body temperature of less than 35 degrees.

Psychosis

Psychosis is a general term used to describe a mental health issues in which a young person experiences changes in thinking, perception, mood and behaviour which can severely disrupt their life.

Psychosis usually first emerges between the ages of 15-30.

The main psychotic diagnoses are drug-induced psychosis, bipolar disorder, psychotic depression and schizophrenia.

Concerning signs

- Tension
- Suspiciousness
- Depression/anxiety
- Irritability/anger
- Mood swings
- Sleep disturbances
- Appetite changes
- Memory problems
- Withdrawal

Early warning signs

- Emerging unusual beliefs
- Perception that things have changed
- Belief that thoughts have speeded up or slowed down.
- Loss of energy or motivation

Symptoms of psychosis

- Hallucinations
- Delusions
- Thought disorder

Symptoms of mania (Bipolar disorder)

- Increased energy and over activity
- Elated mood
- Needing less sleep than usual
- Rapid thinking and speech
- Lack of inhibitions
- Grandiose delusions

Self-harm

Self-harm is a behaviour and not an illness. People self-harm to cope with emotional distress or to communicate that they are distressed.

Examples of self-harming behaviour

- Cutting
- Branding/burning
- Picking at skin/re-opening wounds
- Hair-pulling
- Punching walls, provoking fights
- Drinking harmful chemicals and swallowing objects other than food and drink.
- Taking personal risks
- It may also include multiple piercing or tattooing if pain or stress relief is a factor.

Possible warning signs of self-harm

- Unexplained accidents or injuries – cuts, bruises or cigarette burns on the wrists, arms, thighs and chest.
- Keeping fully covered even during warm weather
- Avoidance of PE
- Sharp objects amongst belongings.
- Blood stains on clothes/tissues.
- Relationship issues – changes in socialising, sleeping and eating patterns.
- Breakdown of typical communication
- Low self-esteem, isolation, irritability and mood changes.
- Poor performance at school.
- Loss of interest in favourite hobbies/sports.

Possible harm minimisation strategies

- Delay urges to self-harm for ten minutes – monitor feelings and what helps.
- Kick or punch something soft
- Put a rubber band over wrists and 'snap' them
- Pinch the skin instead of cutting
- Try physical exercise or exertion – walking/tidying
- Slam doors, scream or sing to loud music
- Draw on the body with red markers as an alternative to seeing blood.
- Squeeze ice cubes for a short time as an alternative to burning.
- Carry safe things to squeeze – tennis/stress ball.
- Use creativity to distract from self-harm – hobbies, yoga, talking, phone support lines.

Self-harm is an act of survival, not a final act. However, with repeated self-harm comes a greater risk of attempted suicide.

Suicidal Crisis

Suicide warning signs

Feelings: desperation, anger, guilt, worthlessness, loneliness, sadness, hopelessness, helplessness.

Thoughts

- "All of my difficulties will be over soon"
- "There's nothing that anyone can do to help me now."
- "I just can't cope anymore"
- "I wish I'd never been born"
- "Everyone will be better off without me"
- "Everything I do is wrong"

Physical:

- Lack of interest in appearance#
- Disturbed sleep
- Change/loss of appetite and weight
- Physical health complaints.

Behavioural:

- Withdrawal from family, friends and school
- Loss if interest in hobbies
- Abuse of alcohol/drugs
- Self-harming behaviour
- Reckless behaviour
- Extreme behaviour changes
- Impulsivity
- Giving possessions away
- Secrecy

How to assess if a young person may be in suicidal crisis

Questions to ask…

1. Are they experiencing a crisis in their life?
2. Are they feeling hopeless or helpless?
3. Have they withdrawn from their usual activities?
4. Have they started risk-taking behaviour?

If you think a young person is at risk of suicide, **be direct**.

Ask: "Are you having thoughts of killing or harming yourself?"

If someone admits to thoughts of suicide, continue to listen follow the CPR approach.

CPR

1. **C**urrent Plan - find out if the young person has a current plan, have they made preparations, do they have the means to complete suicide?
2. **P**rior and recent behaviour – have they attempted suicide before, self-harmed or engaged in risk-taking behaviour? If so, have they been taking greater risks recently? Has anyone close to them every attempted suicide?
3. **R**esources – have they told anyone else about how they are feeling? Are they already in touch with mental health services? What resources do they have for support? Who could they turn to? If they have felt like this before, what helped then?

Current plan questions

1. PLAN - Do you have a current plan? Do you know how and where?
2. MEANS - Do you have what you need to carry out your plan?
3. TIME SET - Do you know when you would do it?
4. INTENTION - Do you intent to attempt suicide?
5. INTOXICATION - Have you been using drugs or alcohol?

How to help

1. Ensure your own personal safety
2. Ensure the young person is not left alone
3. Seek immediate help – immediate first aid if necessary and call 999.
4. If alcohol and drugs and being consumed – discourage from taking anymore.
5. Try to ensure that the person does not have ready access to means to take their life.
6. Encourage the young person to talk
7. Find out their supports.

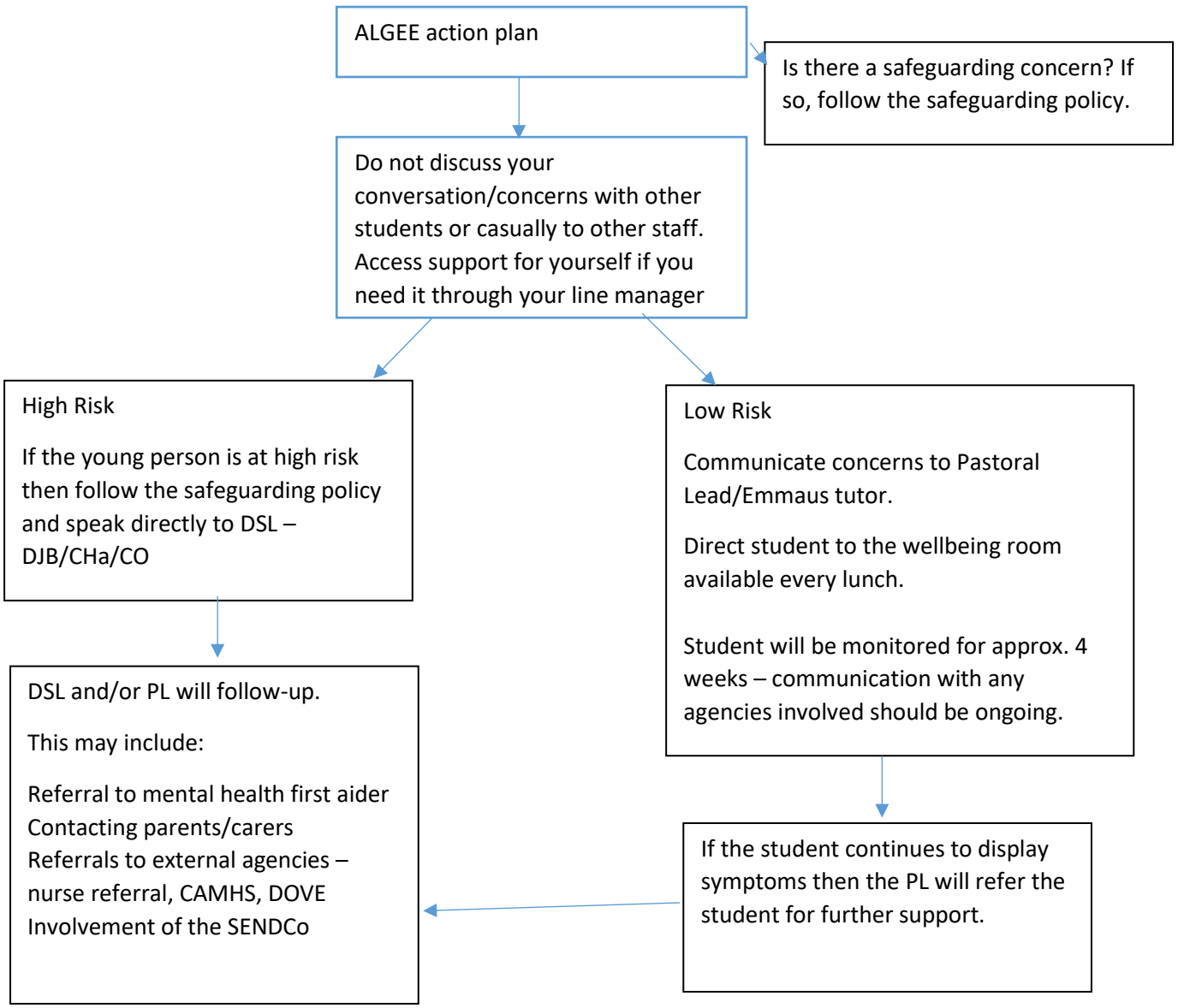
What not to do

- Try not to act shocked
- Don't minimise or brush off the intensity of their feelings
- Don't analyse their motives
- Don't argue or lecture
- Don't ridicule or use guilt to prevent suicide
- Don't be sworn to secrecy – confidentiality never applies to suicide.

The Mental Health First Aid Action Plan

ALGEE (see appendix for further details)

What next?


ALGEE action plan
Is there a safeguarding concern? If so, follow the safeguarding policy.
Do not discuss your conversation/concerns with other students or casually to other staff. Access support for yourself if you need it through your line manager
High Risk
If the young person is at high risk then follow the safeguarding policy and speak directly to DSL – DJB/CHa/CO
Low Risk
Communicate concerns to Pastoral Lead/Emmaus tutor.
Direct student to the wellbeing room available every lunch.
Student will be monitored for approx. 4 weeks – communication with any agencies involved should be ongoing.
DSL and/or PL will follow-up.
This may include:
Referral to mental health first aider
Contacting parents/carers
Referrals to external agencies – nurse referral, CAMHS, DOVE
Involvement of the SENDCo
If the student continues to display symptoms then the PL will refer the student for further support.

Helpful resources

www.childline.org.uk
www.youngminds.org.uk

Depression organisations:

www.mind.org.uk

www.themix.org.uk

www.studentsagainstdepression.org

www.healthtalk.org

Anxiety organisations:

www.anxietyuk.org.uk

www.nopanic.org.uk

www.ocdaction.org.uk

www.getselfhelp.co.uk (CBT self-help site)

Suicide support organisations

www.samaritans.org

www.cwmt.org.uk (Charlie Walker Memorial Trust)

www.papyrus-uk.org

Psychosis organisations

www.rethink.org

www.iris-initiative.org.uk (Imitative to reduce the impact of schizophrenia)

www.hearing-voices.org

www.sane.org.uk

www.bipolaruk.org

www.voicecollective.co.uk (peer support)

Self-harm support organisations

www.nshn.co.uk

www.harmless.org.uk

www.lifesigns.org.uk

www.selfharm.co.uk