

WELLBEING HANDBOOK

2019



Carrum Downs
Secondary College

About This Handbook

Welcome to the CDSC Wellbeing Handbook.

This handbook introduces the College community to the integral role of Wellbeing at Carrum Downs Secondary College (CDSC).

The College Community can use this handbook to:

- Inform their understanding about the services and programs of Wellbeing
- Inform themselves about their particular role in collaborating with the Wellbeing Team to support diverse student needs

For more information, please contact the Wellbeing Leader.

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About CDSC Wellbeing

Vision Statement

Carrum Downs Secondary College is committed to creating an inclusive learning environment that supports all students. Our Wellbeing Team works to the mantra of **'helping you help yourself'** with learning being central. We believe in the holistic health and relationship between physical, mental and spiritual wellbeing.

What does the Wellbeing Team do?

Services and programs include:

- One-on-one social and emotional support
- Social and emotional group programs
- Health and wellbeing programs
- Integration support
- Referrals to internal and external services/resources where appropriate

Wellbeing forms an integral part of the College's student engagement policy.

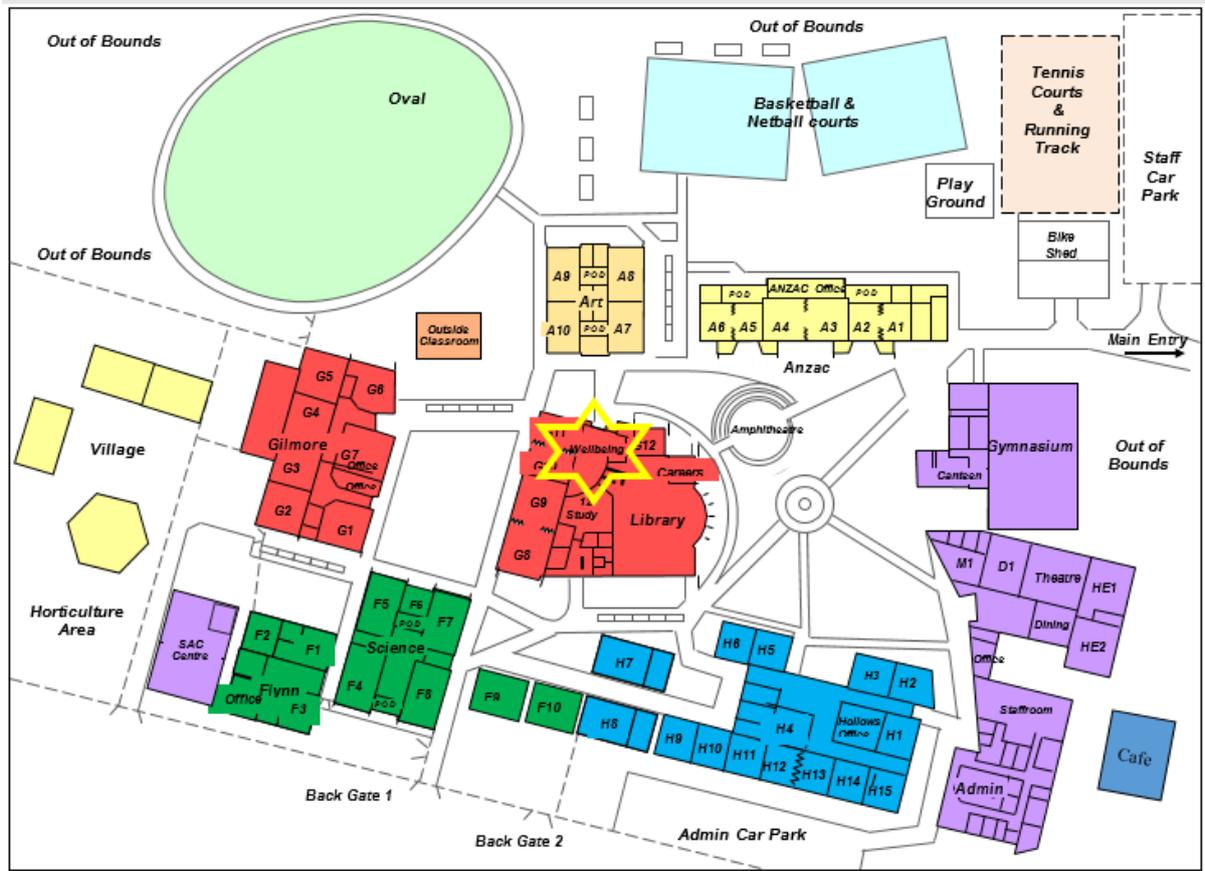
Accessing the Wellbeing team

Upon beginning Year 7 at CDSC, all students are introduced to the Wellbeing Team, its role and services available, and taken on a tour of the area. They receive a brochure which outlines who they can talk to if they feel unsafe or have a concern. This information is also publicised in student-friendly language on posters in all classrooms which is accessible to all students of the College.

The Wellbeing Area operates from 8.30am to 4.30pm, where students are seen only during school hours (8.50am to 3.10pm). As the Wellbeing Area is not always supervised (one-on-one counselling sessions prevent supervision of other students in the area), students are not encouraged to use Wellbeing as a "drop-in" service during class time. If a student expresses a need for Wellbeing assistance, they should be directed to their House Leadership Office.

Additionally, the Wellbeing Team aims to provide support for student learning and is NOT an unlimited ongoing service. Students will be referred to external supports if ongoing assistance is required.

Where is the Wellbeing Area?



The Wellbeing Team

The Wellbeing Team consists of:

Eve Koutsampasis Wellbeing Leader	
Olivia Jackson Counsellor	Carol Vercoe Community Engagement
James Lemondine DET Student Support Services	Jeanette Trembearth DET Secondary School Nurse
Eric Clarke DET Koorie Engagement Support Officer	Doctors in Secondary Schools

The Wellbeing Team operates in close association with the Student Support Team who are listed below. Please refer to the Student Support Handbook for further information.

Carolyn Toniolo Student Support Leader	
Deborah Jones Integration Aide	Leah Sandl Integration Aide
Michelle O'Connor-Price Integration Aide	Catherine Maling Integration Aide
Jo Resuggan Integration Aide	

Wellbeing Leader

The Wellbeing Leader is responsible for the Wellbeing department and is the first point of contact regarding students' wellbeing.

The role includes; overseeing general running of wellbeing, liaising with Parents and Carers, House Leadership Team, Principal Team and all College members regarding student's wellbeing. Attending Student Support Group meetings, Safety Plan meetings, collecting and reviewing Wellbeing data, developing and implementing tailored Wellbeing Programs, overseeing students in Out of Home Care and who identify as Koorie.

The Wellbeing Leader also liaises with external services including; Department of Health and Human Services, Department of Education, Orange Door, Headspace, Early in Life Mental Health Services, and Victoria Police.

Furthermore, the Wellbeing Leader has a caseload of students and sees them in a 1 on 1 or group capacity, implementing evidence based interventions and strategies.

Counsellor

The school counsellor sees students' referred to them in a 1 on 1 capacity or group program. It is expected that the school counsellor sees a minimum of 6 students per day, takes hand written notes during the session, documents the session on COMPASS under confidential notes and emails the Wellbeing Leader, House Leadership Team and Assistant Principals the list of students seen at the end of each working day.

It is expected that the school counsellor informs the Wellbeing Leader if a student discloses thoughts of suicidal idealisation, self-harm or are at immediate safety risk. In the absence of the Wellbeing Leader, the counsellor must inform a member of the Principal Team.

The counsellor is also responsible for supervising and running Breakfast Club, Lunchtime Programs and liaising with Second Bite.

Community Engagement and Student Re-engagement

The community engagement worker is responsible for liaising with organisations within the local community, parents, carers, families and young people. Furthermore, the community engagement worker liaises with the relevant staff of Carrum Downs Secondary College, including the Principal Team, Wellbeing Leader, House Leaders, Learning Area Leaders and all teaching and education support staff.

The community engagement worker is also responsible for running the Parent and Carers Group, meeting once a month and actioning any outcomes from the meeting.

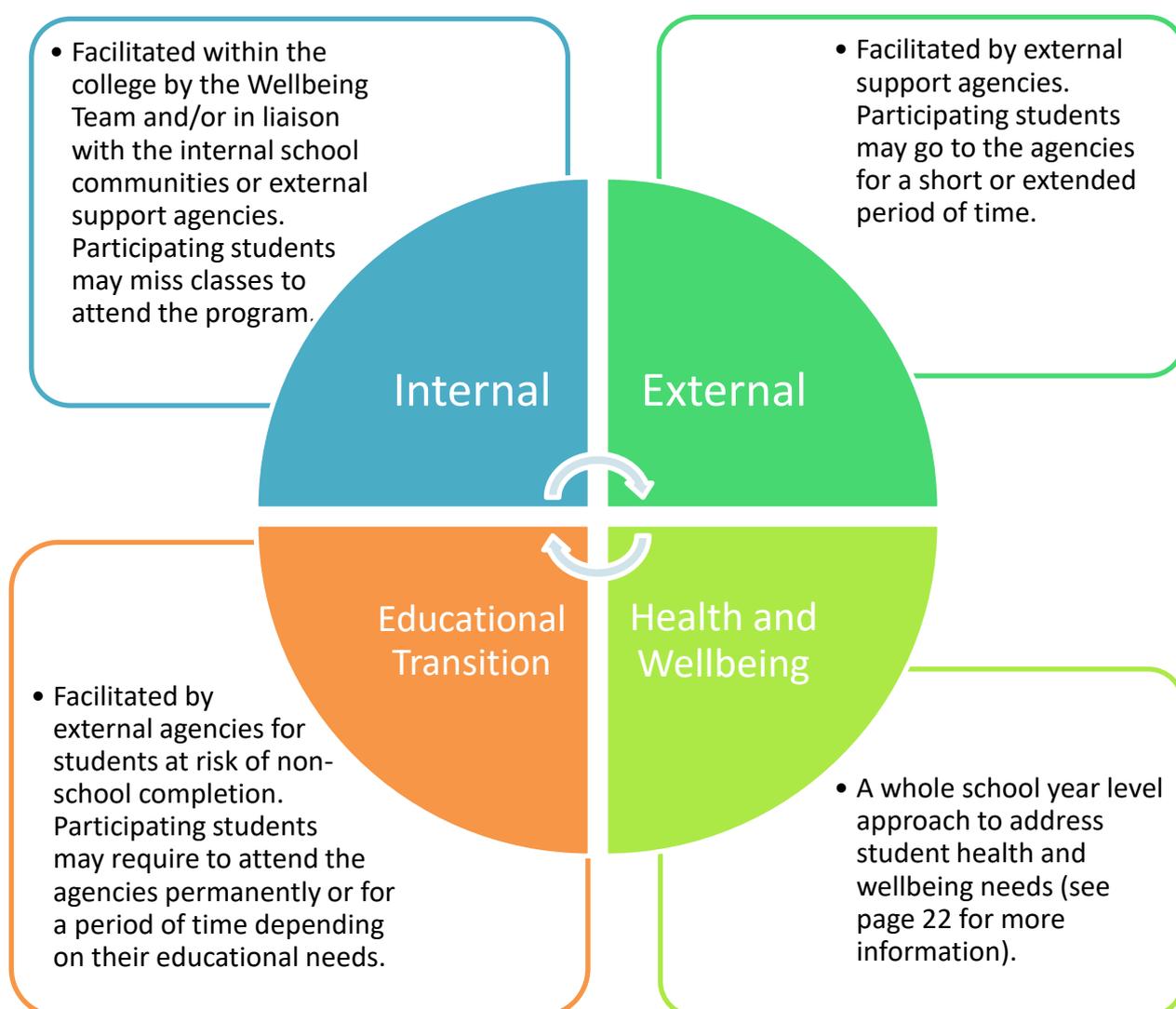
Wellbeing Programs

The Wellbeing Team liaises with many external support agencies and the internal school community to develop and provide a range of programs and interventions for students attending CDSC.

NB. College staff should not make referrals or contact external support agencies for students to attain support and participate in programs.

Wellbeing programs at CDSC include:

- Internal Programs including extracurricular and small group programs
- External Programs
- Health and Wellbeing Programs
- Educational Transition Programs



Internal Programs

Wellbeing offers a variety of programs throughout the year, which are subject to change. The aim of this directory is to provide college staff with a general idea of the Internal Programs offered in Wellbeing.

Wellbeing offers the following programs, which is a great way for students to meet others in a safe environment:

- Breakfast Club which runs Tuesday – Friday from 8:30 am – 8:45 am.
- Lunchtime programs – every Tuesday, Wednesday and Thursday.
As activities change, please check COMPASS and the flyer in wellbeing and each house office.

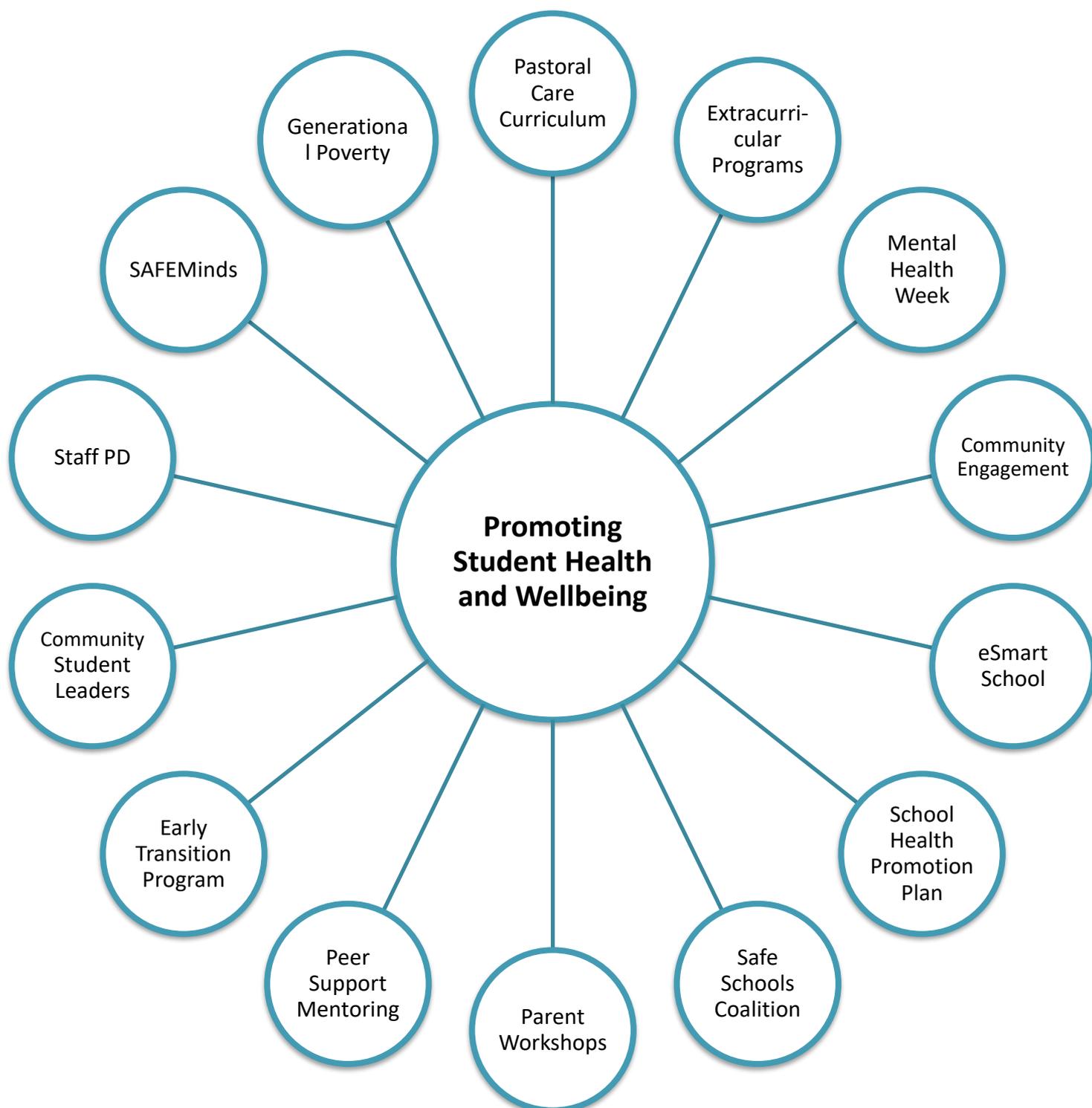
Please contact the Wellbeing Team for up-to-date information and to explore suitable options for students.

NB. Where a referral is required, only House Leaders can make a referral for a student to participate in the program.

Breakfast Club	Chill Out	Art Club
Queer Straight Alliance	Art Therapy	Anger Management
Life Skills	Free To Be (Girls Self-esteem)	The Value of You (Boys Self-esteem)
Extracurricular (open to all)	Small Group (targeted-support)	

Other Wellbeing Initiatives

The Wellbeing Team takes a proactive approach to promote student health and wellbeing by leading and contributing to numerous college and student activities. The diagram as illustrated below highlights key school-wide initiatives led by the Wellbeing Team.



Community Partnerships

At Carrum Downs Secondary College, our Community Engagement Co-Ordinator liaises with parents, families and organisations in our local community. Furthermore, since 2019, CDSC has developed a parent/carer's group that meets monthly to discuss how to further support and develop our school and community.

In addition to working with college staff, the Wellbeing Team highly values partnerships with community based support services and continually seeks new and exciting opportunities to engage students and families in lifelong learning. The diagram as illustrated below highlights some key partnerships facilitated by the Wellbeing Team.

NB. College staff should not make referrals or contact external support agencies for students to attain support and participate in programs.



DET Support at CDSC

Doctors in Secondary Schools

What is Doctors in Schools (DIS)?

DIS is an initiative the government has introduced in selected schools to help with:

- Making health care more accessible to students
- Provide assistance to young people to identify and address any health concerns early
- Reduce pressure on working parents

GPs will provide students with the same services as those of any General Practice in the community, including management of physical health, mental health, and sexual and reproductive health issues. GPs may also make referrals to other health services if required.

The clinic is open every **Tuesday, 9:30am-2:30pm** and appointments are **free** of charge with a valid Medicare card.

Appointments can be made via:

1. Booking through conferences on COMPASS
2. Seeing a Wellbeing Staff Member
3. Seeing First Aid

Drop in appointments are also available during recess and lunch time.

Students should only be out of class if they have an appointment appearing on Compass. Students may be given an “on-the-day” appointment time which is indicated by a note provided by the Nurse.

The DIS service can also be used for first aid treatments.

DET Support at CDSC

DET School Nurse

The Secondary School Nursing Program (SSNP) aims to reduce risk to young people and promote better health in the wider community.

The key role of the secondary school nurse is to support health promotion and primary prevention in secondary schools. Through identifying and building on existing school initiatives and providing appropriate preventative health care, secondary school nurses assist schools to better support the health and wellbeing needs of their students.

The role encompasses:

- Health promotion and primary prevention
- School community development activities
- Small group work focussing on health related discussions and information
- Individual student health counselling
- Advice and referral to assist young people in making healthy life style choices.

Secondary school nurses are involved at various levels in the school, with their involvement dependent on the needs of the school. Nurses are typically part of a school's student wellbeing team, working collaboratively to address student health and wellbeing issues.

Teachers at CDSC are encouraged to use the Secondary school nurse in supporting the development of health related curriculum and policy, the delivery of health education in partnership with teachers, providing input in to school planning processes, and the delivery of individual and group programs for students.

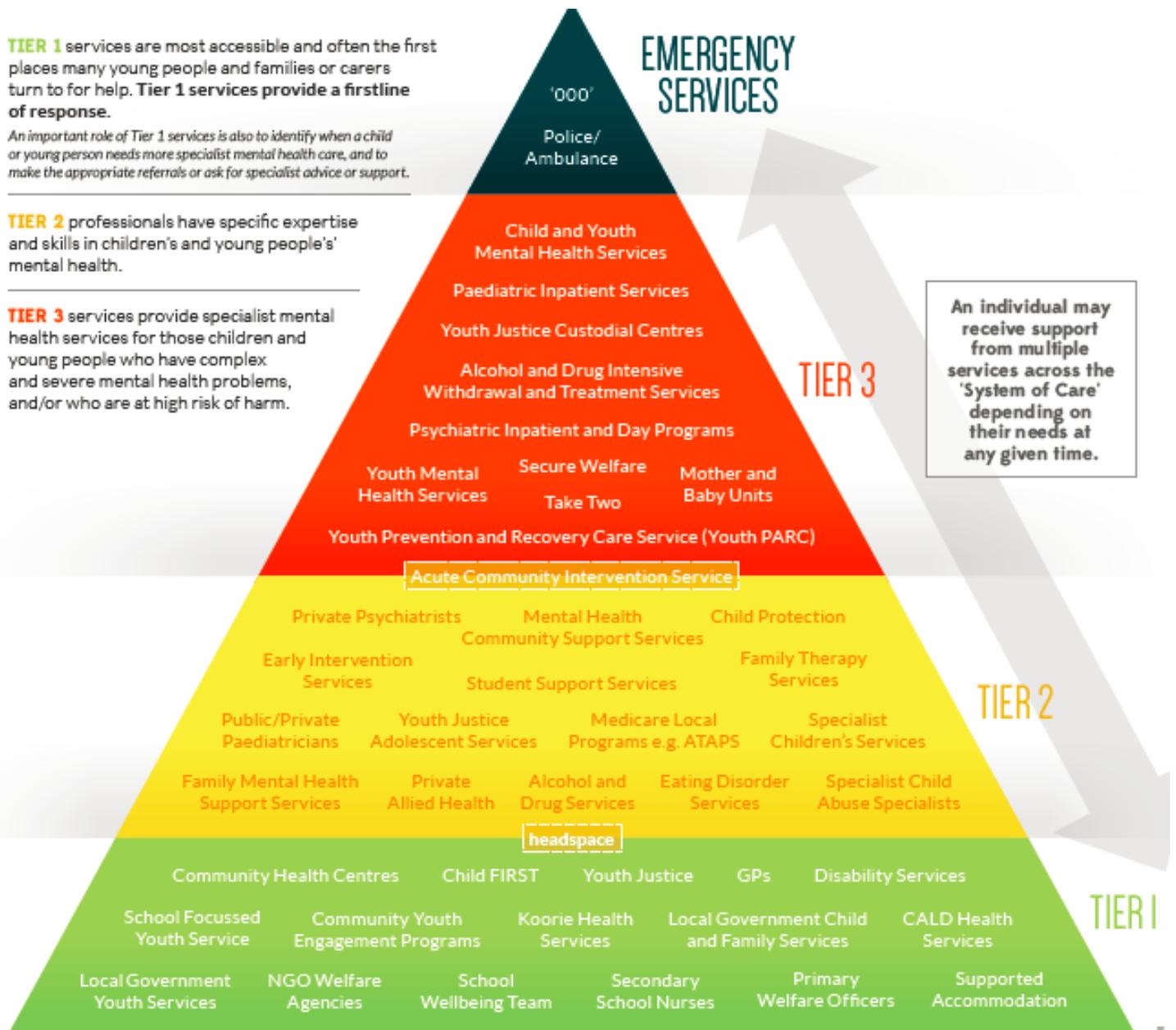
External Health Supports Structure

TIER 1 services are most accessible and often the first places many young people and families or carers turn to for help. Tier 1 services provide a firstline of response.

An important role of Tier 1 services is also to identify when a child or young person needs more specialist mental health care, and to make the appropriate referrals or ask for specialist advice or support.

TIER 2 professionals have specific expertise and skills in children's and young people's mental health.

TIER 3 services provide specialist mental health services for those children and young people who have complex and severe mental health problems, and/or who are at high risk of harm.



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CDSC Support Structure

Wellbeing

Wellbeing will engage in 1:1 counselling with the student and further *plan* on how to support the young person.

PCO

Principal Class Officers are to regularly meet with the House Leader and Wellbeing Leader, and to *plan* on how to support the young person.

House Leader

HL are required to *inquire* sensitively and competently about the young person's circumstance, put in a wellbeing referral and liaise with the Wellbeing Leader.

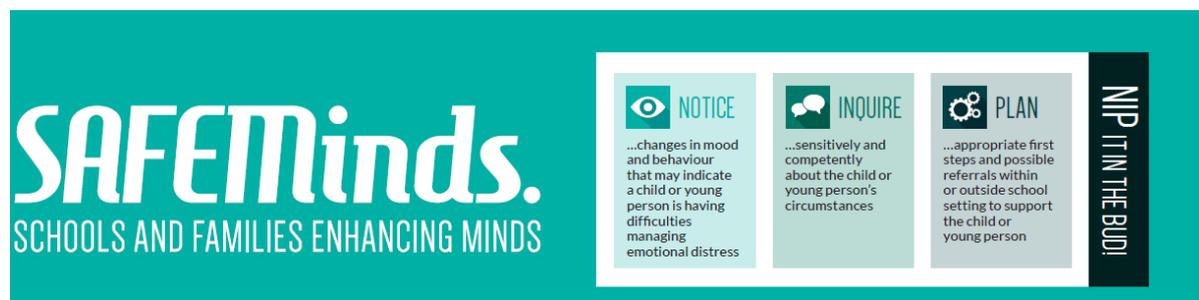
Assistant House Leader

AHL's are to put in a wellbeing referral for the student, and email the HL that this has been done. In the absence of the HL, AHLs are to *inquire*.

Teachers, HSO & ES staff

Staff members are to *notice* a change in a student's presentation and report this to the student's House Leader via email.

What is SAFEMinds?



Introduction:

The Victorian Government has partnered with headspace, the National Youth Mental Health Foundation to develop *SAFEMinds: Schools And Families Enhancing Minds*, a comprehensive learning and resource package that will enhance the capacity of school communities to effectively identify children and young people with early signs of mental health issues, offer school-based interventions and refer appropriately when needed.

As a school we have had Principal Class, Wellbeing & Members of the House Leaders trained in Safe Minds.

SAFEMinds aims to:

- *Enhance early intervention mental health support for children and young people in schools; specifically regarding mild mood disorders (anxiety and depression) and self-harm*
- *Increase engagement of parents and carers with schools to more effectively support their child's mental health; and*
- *Develop clear and effective referral pathways between schools and community youth and mental health services.*
- *Early intervention strategies are designed to assist children and young people with emerging mental health issues before they develop into more serious illnesses or other associated problems.*

Schools play a critical role in the social and emotional learning of children and young people:

SAFEMinds is an important resource for teachers as they are in the unique position of interacting with students daily, can build rapport and offer support, help with successful learning and development, and connect students and families to community services and resources when needed.

SAFEMinds Framework

Wellbeing Framework System for Carrum Downs Secondary College:

N

Notice -
Teachers and
College Staff

Notice changes in mood and behaviour that may indicate a child or young person is having difficulties managing emotional distress.

I

Inquire -
House Leaders

Inquire sensitively and competently about the child or young person's circumstances.

P

Plan -
Wellbeing/
Principal Class

Plan appropriate first steps and possible referrals within or outside the school setting to support the child or young person.

What Might You Notice?

THINGS TO NOTICE

- Consider how the child or young person functions day to day.
- Decide if changes are developmentally appropriate.
- Monitor how long they have appeared distressed.
- Consider individual factors (i.e. temperament, sociability or disability).
- Appreciate cultural, family and personal experiences that may influence emotional regulation.
- Be aware of signs and symptoms of emerging mental health problems.
- Identify students who may need additional support for their mental health and wellbeing.

TRIGGERS FOR EMOTIONAL DISTRESS IN CHILDREN AND YOUNG PEOPLE

- Real or perceived loss
- Relationship breakdown
- Abuse (physical, sexual, emotional)
- Feeling overwhelmed or hopeless
- Serious illness/disability
- Family conflict
- Peer relationship problems including bullying
- Academic pressure or issue with school work

FORMS IT MAY TAKE	EXAMPLES AT SCHOOL
Worry	Distorted thinking or worry, expressed fear of future events or new people
Avoidance	Avoiding social situations, avoiding 'self-expressive' activities such as drama and PE
Attention to threat	May frequently scan their environment for 'danger', easily startled when there are loud noises Irritable or agitated Has difficulty concentrating/paying attention or is easily distracted
Physical arousal	Going to the toilet frequently, blushing, sweating, fidgety behaviour, shaking knees
Physical complaints caused by worry and stress	Frequent trips to the sick bay or school nurse
Difficulty resting and sleeping	Yawning excessively, heavy eyes
Excessive shyness	Avoids eye contact, displays 'shuffling' movements
Social withdrawal	Social isolation or being withdrawn
Perfectionism	Excessive use of erasers or whitener May be overly critical of school work, handing in work late due to never being satisfied with school assignments
Appetite changes	Sudden and unexplained weight change, playing excessively with lunch, taking a lot longer to consume lunch

FORMS IT MAY TAKE	EXAMPLES AT SCHOOL
Loss of pleasure/Apathy	Claims to be bored Losing interest and pleasure in activities that were once enjoyed Lack of energy and motivation
Emotional changes	Unhappy, seems 'down' most of the time, feelings of worthlessness or hopelessness Blames him or herself excessively Talks about death or hurting him/herself Tearfulness or frequent crying, feeling worried or tense
Slowed movements	Dawdling, dragging self around
Restlessness/Risk taking	Seems restless and fidgety in class Self harm Deteriorated self-care or adolescent promiscuity
Irritability/Agitation	Fidgeting, can't settle, nervous, jumpy
Sleep problems/Fatigue	Problems going to sleep or staying asleep, waking early, or sleeping a lot Tired all of the time
Social withdrawal	Seems lonely, avoids other people Decreased participation with peers
Negative self image	Negative body image and low self-esteem – particularly relevant for adolescents
Physical signs	Changes to appetite and weight May be accident prone Paying poor attention to personal hygiene and appearance
Cognitive impairment	Doesn't listen, can't focus on tasks, forgets details Draws wrong conclusions, expects the worst Difficulty making decisions
Poor school attendance	Missing classes, school refusal

If you “notice” something...

CDCS staff are encouraged to be vigilant with the SAFEMinds practice. If something is noticed about a student, classroom teachers (and other non-teaching staff) must report the information to the student’s House Leadership Team. This information will then be acted upon and the trained House Leaders will support the student by inquiring and usually proceeding with a wellbeing referral.

It is important that staff pass on information that is noticed as soon as possible, and that they don’t proceed past this level of the SAFEMinds process. Although staff may believe they are supporting the student, best practice indicates that using the systems in place will provide the best support for the student.

Mandatory Reporting- What is it?

Mandatory reporting to Child Protection or Orange Door?

1. When college staff suspect or identify that a young person is or has experienced abuse and/or neglect, a report to the **Department of Health and Human Services (DHHS) Child Protection** must be made.

A report to Child Protection must be made in the following circumstances:

- Physical abuse or non-accidental or unexplained injury to a young person.
 - Disclosure of sexual abuse by a young person or a witness or a combination of factors suggesting the likelihood of sexual abuse.
 - Emotional abuse and ill treatment of a child impacting on the child's stability and healthy development.
 - Persistent family violence or parental substances misuse, psychiatric illness or intellectual disability where there is a likelihood of significant harm to the child or to the child's stability and healthy development.
 - Where the child's action or behaviour may place them at risk or significant harm and the parents are unwilling or unable to protect the child.
 - Where a child appears to have been abandoned, or where the child's parents are dead or incapacitated and no other person is caring properly for the child.
2. A report to **Orange Door** should be made if the concerns about the young person currently have a low to moderate impact on the child, where the immediate safety of the child is not compromised. This may be due to the following circumstances:
 - Significant parenting problems that may be affecting the child's development.
 - Family conflict, including family breakdown.
 - Families under pressure due to a family member's physical or mental illness, substances abuse, disability or bereavement.
 - Young, isolated and/or unsupported families.
 - Significant social or economic disadvantage that may adversely impact on a child's care or development.

Referring to **Orange Door** may be the best way of connecting the young person and their family to the services they need.

NB.

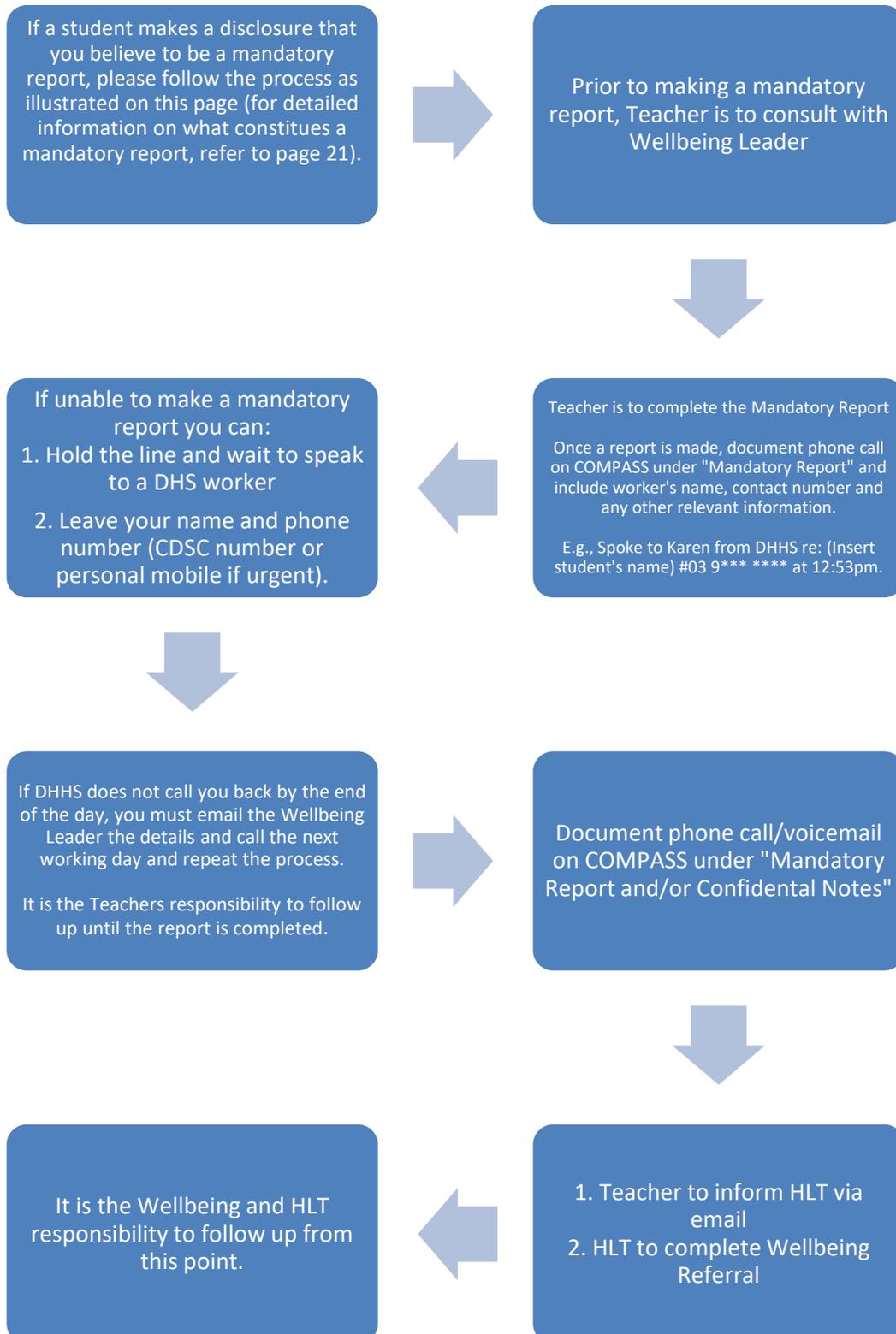
- Please remember your role is **NOT** to investigate or seek proof of the abuse. Your role is to report what you know.
- It is your responsibility to ensure that the **mandatory report is made on the same day** the disclosure is made.

Prior to making a mandatory report, try and make sure you know the answers to the following questions:

- Student – name/ gender/ date of birth/ home address/ in whose custody
- Siblings – names/ ages
- Parents – names/ marital status any other adults at home
- Family – extended family/ other adults at home
- History – violence/ abuse
- Other agencies – any other involvement
- Alleged abuse – description, details/ description of indicators physical abuse, behavioural
- Notifier – identification/ how did you form your belief/ relationship with young person

Mandatory Reporting: Process

DHHS mandates Teachers to report. The following flow chart outlines the recommended process and further assistance can be provided by the Wellbeing Leader.



Staff Wellbeing

If a member of staff feels like they require immediate wellbeing support, they can:

a) Contact the Wellbeing Leader, Principal Class member, House Leader or Direct Supervisor (whoever they feel most comfortable to discuss concerns)

b) To arrange a time to meet for a confidential one off appointment with a counsellor, please make contact with the Wellbeing Leader

NB: CDSC's Wellbeing team is unable to provide counselling in an ongoing capacity

c) Contact Employee Assistance Program (EAP) 24 hours 7 days
- 1300 361 008

d) Obtain Mental Health Care Plan (MHCP)/own private counselling/support services

All matters dealt with in school will be kept confidential.

Frequently Asked Questions

1. *How do I refer a student to wellbeing?*

To refer a student to Wellbeing, firstly decide if the matter is urgent or not. If not, email your concerns and what you have *noticed* to the House Leadership Team (refer to p.18 for further information).

2. *Can students drop in as required?*

Wellbeing is not always supervised due to counselling sessions, therefore, we encourage students and staff to not use the space as a “drop-in” service during class time.

If a student expresses a need to speak to Wellbeing, they should be directed to their House Leadership Office.

3. *I know a student is linked in with Wellbeing and am concerned about them, can you tell me how they're going?*

Due to privacy and confidentiality, Wellbeing is unable to discuss the details of counselling sessions. With the permission of the student, the Wellbeing Leader may share some information with the House Leader, who may discuss with classroom teachers.

4. *I am worried about a student but they do not wish to engage with Wellbeing. What do I do?*

It is imperative for you to pass on your concerns to the student's House Leader, so the Wellbeing Team can follow up with the student to implement evidence based strategies and supports.

5. *What can I do as a classroom teacher to support a student with their mental health?*

As part of our Wellbeing and SAFEMinds policies, classroom teachers and all non-teaching staff are to *notice* any changes in the young person, report to the House Leader and continue to follow the SAFEMinds process.

