Mental Health in Primary Schools

Starter Pack

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# Overview of the Mental Health in Primary Schools program

## Mental Health in Primary Schools program aims

The Mental Health in Primary Schools program aims to:

* build the capability and confidence of educators to better identify and support students with mental health concerns
* de-stigmatise mental health issues, increase mental health literacy, and build whole school approaches to mental health through cultural and structural change
* implement effective mental health strategies aligned to social and emotional learning in the curriculum and whole school approaches to health, wellbeing, teaching and learning initiatives
* develop a clear pathway for referrals for students identified as requiring further assessment and intervention within the school and to regional and external community-based services
* build connections with local health services and better navigate the service sector
* improve mental health and wellbeing outcomes for students which as a result also improve social and academic outcomes.

## What can schools gain by participating in the Mental Health in Primary Schools program?

The Mental Health in Primary Schools model focuses on improving teacher and school capacity to support student mental health and wellbeing. Through improvements in teacher and school support of student mental health, the program aims to improve student mental health and wellbeing in the longer term. The program supports the mental health and wellbeing outcomes of students through a whole school approach. This also generates broader benefits for teachers, school leaders and parents through participating in the program.

**Students**

* Improved mental health and wellbeing outcomes for students which as a result also improve social and academic outcomes
* Increased mental health literacy and access to tools and supports for enabling healthier lifestyles and approaches to learning

**Teachers**

* Improved mental health literacy in support of students’ social and emotional learning
* Increased confidence to identify and support students with mental health concerns and refer them to internal or external services
* Delivering social and emotional learning content in conjunction with curriculum-based learning
* Supporting students’ mental health and wellbeing at whole school, classroom and individual level

**Mental Health and Wellbeing Leaders**

* Improved mental health literacy in support of students’ social and emotional learning
* Increased confidence to identify students with mental health concerns and refer them to internal or external services
* Increased understanding of and ability to integrate the broad range of initiatives at the school level
* Embed positive mental health promotion and early intervention strategies across the school

**Parents**

* Greater participation and dialogue with schools about the mental health and wellbeing of their children
* Reduced stigma about mental health

## Mental Health in Primary Schools and FISO 2.0

**The Framework for Improving Student Outcomes (FISO) 2.0** is the improvement framework for all Victorian government schools. Version 2.0 has been redesigned to place learning and wellbeing at the centre of school improvement, in response to the Royal Commission into Victoria’s Mental Health System and advice from schools and key stakeholders.

FISO 2.0 highlights the importance of students being happy, healthy and resilient to enable successful learning and broader engagement in education. The Mental Health in Primary Schools program supports schools to think about the broader mental health and wellbeing supports and structures that they have in place in this context, and to frame them to maximise outcomes for students and supports for teachers.

Diagram, schematic

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Figure 1.3 The Framework for Improving Student Outcomes (FISO 2.0)

## A holistic approach to student mental health and wellbeing needs

The Mental Health in Primary Schools program is part of a larger suite of student mental health initiatives that the Department of Education and Training is implementing across the 3 tiers of support, as shown in the diagram below.

Mental Health and Wellbeing Leaders will develop a high-level understanding of all these programs and how they might use them in their role with their school. Knowledge of these programs with a focus on Universal and Tier 2 interventions will enable the Mental Health and Wellbeing Leader to provide guidance to school leadership and teachers on the mental health and wellbeing strategy that will best meet their school’s needs. Tier 3 could be assisting a teacher to write a behaviour plan, though not individual student counselling.

Diagram

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Figure 1.4 Tiers of Mental Health Support

To understand the role of the school in promoting the 3 tiers of support, schools can go to the [Mental Health and Wellbeing Toolkit](https://www.vic.gov.au/schools-mental-health-toolkit) for further information.

## Impact success factors

By prioritising a whole school approach to mental health and wellbeing, the Mental Health in Primary Schools program promotes a focus on prevention. Achieving impact within a school needs strong, active relationships across the school. This is evident in the following five key impact success factors: School leadership, dedicated Mental Health and Wellbeing Leader, integrated wellbeing team, confident and capable educators, and partnerships with parents and engaged learners



Figure 1.5 Impact Success Factors

|  |  |
| --- | --- |
| Success Factor | Description |
| Supportive school leadership | A supportive school leadership team is committed to advocating for and implementing the Mental Health in Primary Schools program.  This includes:   * including health and wellbeing discussions on the School Improvement Team agenda regularly * promoting wellbeing as a precondition for learning and incorporating FISO 2.0 in practice * advocating for the involvement of the Mental Health and Wellbeing Leader in staff professional development * attending training alongside the Mental Health and Wellbeing Leader * involving the Mental Health and Wellbeing Leader in strategic planning discussions and Annual Implementation Planning * communicating the benefits of the program with parents, carers and the broader school community in newsletters, at School Council, in discussions with parents etc. |
| **Dedicated Mental Health and Wellbeing Leader** | A dedicated Mental Health and Wellbeing Leader who recognises the impact that the Mental Health in Primary Schools program can have within the classroom and across the school community at the universal tier.  This includes:   * a leader who is well versed in health and wellbeing literacy * creating an internal referral pathway and ensuring that staff can use this with fidelity * working closely with leading teachers to design and embed Social and Emotional Learning activities for the classroom * encouraging the use of a common social emotional language using existing initiatives such as Respectful Relationships. * supporting professional development of classroom teachers on new mental health and wellbeing topics * keeping abreast of research and understanding current best practice and evidence-based programs and approaches * dedicating their time to understanding the different DET programs and initiatives they can support and implement across the school community * connecting with other Mental Health and Wellbeing Leaders across Victoria, through Communities of Practice, to design and deliver new strategies and projects within their school Community of Practice, local, area and state-wide * building connections with local community mental health services. |
| **Confident and capable educators** | The confident and capable educators are those who are willing to learn from the Mental Health and Wellbeing Leader and apply these learnings into their classroom.  This includes:   * attending dedicated professional learning sessions held by the Mental Health and Wellbeing Leader * knowing how to use the internal referral pathway * inviting the Mental Health and Wellbeing Leader to attend team planning meetings for the delivery of social and emotional learning activities in the classroom * supporting students to develop and understand mental health literacy and use the Mental Health Continuum to support students to reach their potential. |

Table 1.5 Impact Success Factors and Description

Further information on the role of the Mental Health and Wellbeing Leaders and school leadership in supporting this is included in Sections 2.1 and 2.3 (below).

## Mental Health and Wellbeing Leader training

Schools will achieve the best possible outcomes from the program if the Mental Health and Wellbeing Leader and a member of the school leadership team and wellbeing team participate in the evidence-based training delivered by the Melbourne Graduate School of Education (MGSE) at the University of Melbourne, supported by Murdoch Children’s Research Institute (MCRI).

The training includes an annual induction session for new schools, core knowledge and skills modules and Communities of Practice.

**Induction**

* To introduce the Principal, wellbeing staff and the Mental Health and Wellbeing Leader in the Mental Health in Primary Schools program

**Core Knowledge and Skills modules**

* To build conceptual knowledge in mental health and wellbeing along with upskilling qualified teachers to support colleagues, establish and maintain referral pathways and work with parents and families
* Training includes core knowledge and skills modules, along with readings, discussion boards, additional resources and tools to support the Mental Health and Wellbeing Leader role.

**Communities of Practice module**

* To deepen the learning from the first three modules in mental health literacy, building capacity, and supporting need, and relate it to practical aspects of the role
* It provides Mental Health and Wellbeing Leaders with a space to share experiences, strengthen networks and access experts
* MGSE-led Communities of Practice are conducted by a Learning Leader and are held up to three times a term. Topics include case presentations, relationship skills, and cultural safety and understanding
* Communities of Practice topics will also be identified through feedback and queries raised by Mental Health and Wellbeing Leaders and school leaders
* Local self-led Communities of Practice, enabled by Mental Health and Wellbeing Leaders provide opportunity for professional growth

**Learning Leaders**

Mental Health and Wellbeing Leaders are allocated a Learning Leader, The Learning Leaders, part of the Melbourne Graduate School of Education’s Mental Health in Primary Schools Training Team, provide support throughout the school year.

Learning Leaders run the core module training. Communities of Practice and regular drop-in sessions. They also work closely with the department’s Regional teams, ensuring that the Mental Health and Wellbeing Leaders are well supported as they implement Mental Health in Primary Schools within their school.

**Casual Relief Teacher (CRT) support**

Schools can utilise the CRT funding option to enable up to two additional staff to attend the three Core Knowledge and Skills modules. This means schools can leverage different perspectives in translating the training content to the specific school context.

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Ⓒ 2022 Murdoch Children's Research Institute and The University of Melbourne.

Figure 1.6 Overview of the Mental Health in Primary Schools Training Program

## Mental Health and Wellbeing Leader: Training Delivery

The Core Knowledge and Skills modules and the Communities of Practice will be delivered through a combination of self-paced online learning and seminars. Seminars will be delivered both online and face to face. The training evolves each year the school participates in the program, over three phases:

**Establish**

Mental Health and Wellbeing Leaders in schools in the *first year of the program*. The focus is on drawing out the learner’s existing knowledge and experiences to support contextual adaptation and differentiated learning. The below model showcases the training for new schools, along with the first three modules and ongoing Communities of Practice module.

**Enrich**

Mental Health in Wellbeing Leaders in schools continuing from the Mental Health in Primary School pilot/ *2nd year of the program* would be part of Enriched Communities of Practice (ECoP) sessions, with a higher focus on case presentations and advanced knowledge and skills training.

**Embed**

*After 2 years in the program* the focus is on supporting mental health wellbeing leaders to embed their plans into the school, ensuring that practices become part of everyday and ensuring sustainability of the program. Each term their learning leader will facilitate a Support Community of Practice (SCoP). It provides Mental Health and Wellbeing Leaders with a space to share experiences, strengthen networks and access experts

### How can schools see the impact of the training?

Schools are encouraged to invite a member of the school leadership team and a dedicated classroom teacher to attend training alongside the Mental Health and Wellbeing Leader. Every school context is different, and the participation of a range of staff will help to communicate new approaches to mental health and wellbeing across the school community.

Schools are encouraged to:

* Choose a shared working day with other schools across their area, to ensure Mental Health and Wellbeing Leaders can attend training and Communities of Practice as a local group.
* Share mental health and wellbeing insights reflected in the training at staff meetings and in school newsletters.
* Distribute a consistent survey at the start of the year to collect data regarding staff confidence and capability in supporting student mental health and mental health literacy. Check in at the end of the year with collected data to measure progress and implement inquiry.
* Measure impact for students based on regular informative and summative surveys

# What is a Mental Health and Wellbeing Leader?

Mental Health and Wellbeing Leaders are teacher-qualified professionals, registered with the Victorian Institute of Teaching. They are not counsellors or professionals with a qualification in allied health.

Teacher trained Mental Health and Wellbeing Leaders have knowledge of the classroom context, better enabling implementation of curriculum based, positive mental health practices. It also creates a context for early identification of emerging concerns and provision of practice support to the classroom teacher to enable direct and immediate classroom-based adjustments and school-based support. It recognises that not all students with mental health concerns need intensive individualised support and that some children benefit from school and classroom-based adjustments or from support systems already established within the school or local community. Further, many children with potential mental health concerns also struggle with learning, a Mental Health and Wellbeing Leader with an educational background, may support classroom teachers in a way that encompasses both mental health and learning needs.

For the Mental Health and Wellbeing Leader to have a background in teaching is highly beneficial as this can support the alignment of mental health strategies to social and emotional learning in the curriculum. A teaching background helps to provide current or contemporary ‘lived experience’ to the issues and concerns of teachers and students in the classroom to form these strategies. Mental Health and Wellbeing Leaders can support classroom teachers to develop, implement and monitor individualised student Behaviour Support Plans.

The role is titled as a ‘leader’ to recognise the role (consistent with literacy and numeracy leaders), in recognition of the importance of embedding mental health literacy across the school, developing in-classroom support and strategies for teachers, and boosting the confidence of school staff to identify when a student needs support. Mental Health and Wellbeing Leaders receive comprehensive training and receive ongoing support to embed positive mental health promotion and early intervention strategies across the school.

They receive professional development, as outlined in Section 1.7, delivered by MCRI and MGSE which focuses on:

* mental health literacy
* building school capacity
* supporting emerging needs

Mental Health and Wellbeing Leaders also participate in structured and regular Communities of Practice to support their work and connect them with other Mental Health and Wellbeing Leaders. Section 2.4 provides further information on the training provided to support Mental Health and Wellbeing Leaders, and school leaders to successfully implement and deliver the Mental Health in Primary Schools program.

## The role of the Mental Health and Wellbeing Leader

The role evaluates current practices and implements context-relevant programs, approaches and initiatives using in-classroom knowledge and an understanding of teachers’ experiences.

The role of the Mental Health and Wellbeing Leader is to:

|  |  |
| --- | --- |
| Expectation | Example Practices |
| Promote a whole school approach | * Raise awareness among the school community about the importance of promotion, prevention and early intervention through a blog, monthly school updates or newsletter * Build an ‘as-is’ profile of their school’s current approaches to mental health and wellbeing, identifying areas of need within the school and broader community * Be on the School Improvement Team and / or support / make recommendations to set goals for the integration of mental health and wellbeing goals into the school strategic plan and annual implementation plan, refer to Section 3.3 for more details |
| **Participate in Communities of Practice** | * Attend all MGSE-led Community of Practice each term * Coordinate local area group Communities of Practice to further develop networks and provide and receive support from local Mental Health and Wellbeing Leaders |
| **Create clear referral pathways** | * Invest time in understanding the services available in the region, build relationships with local community services and private service providers to support the development of referral pathways |
| **Research and implement evidence-based strategies** | * Support leadership to select programs from the Schools Mental Health Menu which align with identified support needs * Schedule time to invest in their learning. This can include completing the additional readings provided by the University of Melbourne or using the tools learned in training to review programs and strategies that could be implemented in the school. |
| **Build staff capacity** | * Work with educators in co-delivering, framing and exploring innovative ways to deliver social and emotional learning in the classroom in different subjects, including literacy and numeracy, and through a variety of formats. For example, through role play or scenario creation * Delivering professional development sessions for teachers to relay the learnings from training and Community of Practice on evidence-based practices and models in mental health and wellbeing * Working one on one with teachers on a needs basis to build capacity |
| **Contribute to existing wellbeing teams** | * Share resources, knowledge gained from the Community of Practice and training with members of the wellbeing team * Support weekly catchups to understand everyone’s role and the challenges faced by each team member * Work as a team to implement the school internal referral pathways |
| **Collaborate and coordinate mental health support** | * Invest in building a rapport with DET regional staff to understand the larger operating context and contacts across allied health professionals operating in the region * Complement / leverage existing relationships that assistant principals and managers of wellbeing have with Student Support Services and Health and Wellbeing Key Contact |

Table 2.1 List of possible activities related to each responsibility

## Common misconceptions about the Mental Health and Wellbeing Leader role

The Mental Health and Wellbeing Leader role is not designed to require an allied health professional or intended to provide one-on-one or group counselling to students**.**

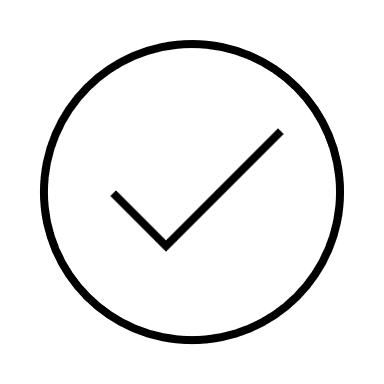
The Mental Health and Wellbeing Leader should not:

* focus on individual student’s mental health assessments, counselling or other roles that would typically be undertaken by an allied health professional
* conduct classes or backfill for a teacher or an allied health worker, unless directed in exceptional circumstances
* provide administrative or operational services for the school broadly.

However, where Mental Health and Wellbeing Leaders are employed at a part-time fraction, for example, 0.6 FTE, they may take on additional roles or responsibilities in their remaining time fraction, for example, 0.4 FTE, if school funding is available such as teaching load or assistant principal.

### Scenario no. 1

Maya is a mental health and wellbeing leader working 5 days a week in a large school. She is responsible for developing content, external connections and delivering professional development sessions on mental health and wellbeing to school leadership and teachers. The school leadership leverages their capacity by:

 Asking Maya to prepare a Professional Development sequence or model an approach in the classroom to respond to challenging behaviour

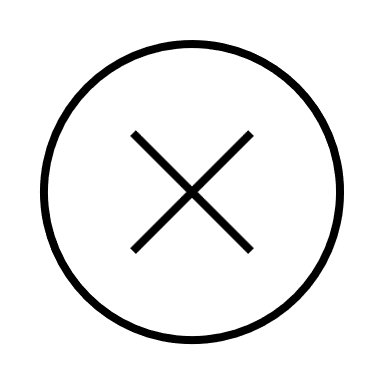
 Requesting that Maya intervene directly when a student is exhibiting challenging behaviour in the classroom

Figure 2.2 Mental Health and Wellbeing Leader role scenario

## The role of principals and other school leaders

The active support and engagement of school leaders is critical to the success of the Mental Health in Primary School program. Principals and other school leaders should proactively and collaboratively advocate, work with and support the Mental Health and Wellbeing Leader to:

* Define the school’s broader mental health and wellbeing goals and outcomes
* Evaluate the school’s current mental health and wellbeing supports and structures, based on its current ability to achieve desired mental health and wellbeing goals
* Articulate actions and activities that can be taken to progress the school towards its mental health and wellbeing objectives, for example the use of the Mental Health Menu Fund
* Monitor and drive towards the activities articulated in the School Strategic Plan or Annual Implementation Plan

The principal should ensure that the Mental Health and Wellbeing Leader is empowered to build the school’s capacity to embed preventative measures to address student mental health and wellbeing challenges and proactively drive towards positive mental health and wellbeing outcomes. This could mean the Mental Health and Wellbeing Leader is on the leadership team.

Wherever possible, principals and other school leaders are encouraged to attend Mental Health in Primary Schools three Core Knowledge and Skills training modules along with their Mental Health and Wellbeing Leaders, to build their understanding of the Mental Health and Wellbeing Leader role, the program more generally and their own enabling role.

## What could the role of a Mental Health and Wellbeing Leader look like in your school?

The table below outlines what a Mental Health and Wellbeing Leader could do to support positive mental health and wellbeing outcomes in their schools.

|  |  |  |
| --- | --- | --- |
| Context | Action | Outcome |
| Staff lacked confidence in mental health literacy and strategies they could use in the classroom | The Mental Health and Wellbeing Leader worked closely to educate staff on mental health literacy along with reinforcing the learning with vocabulary cards and referral contact cards | With each classroom teacher using the same learning strategies and vocabulary, they noticed an overall improvement in the way students and staff discussed mental health and wellbeing |
| **A small school in an isolated area, had school staff that were not confident about disclosing mental health concerns about students** | The Mental Health and Wellbeing Leader designed and ran an all-staff Mental Health professional development session in Term 1 and followed it up with other mental health professional development sessions | The Mental Health and Wellbeing Leader surveyed teachers at the beginning and end of the professional learning and found that classroom teachers shared that they were more confident following each session |
| **A new Mental Health and Wellbeing Leader had limited knowledge of mental health and wellbeing but was passionate about it and needed assistance** | The Mental Health and Wellbeing Leader met with their Learning Leader and local area Community of Practice. The Mental Health and Wellbeing Leaders met to share resources, brainstorm strategies and ideas, and provide support and advice to one another | Active involvement in their local area, Community of Practice helped the new Mental Health and Wellbeing Leader come up with ideas to trial in their school, and ensured they felt supported by others undertaking the same work. |
| **Data from Attitudes to School Survey showed that students did not feel trusted relationships with staff were established** | The Mental Health and Wellbeing Leader organised multiple professional learning sessions on mental health literacy and what it could look like in their school setting | Learning sessions focused on Tier 1 support, and when they need to introduce Tier 2 and 3 interventions and supports  After the program, collected data from Mental Health and Wellbeing Leader review surveys indicated that staff felt they could actively communicate with students about mental health, and students felt comfortable sharing their own mental health concerns |

Table 2.4 Real case scenarios

### Scenario no. 2

Jason is a newly trained Mental Health and Wellbeing Leader in a government primary school with a moderately high Student Family Occupation and Education (SFOE) score. Candice, an experienced third-grade teacher believes that students in her class do not share the same zeal as previous students had in the pre-COVID years. As part of the larger focus by the school on mental health and wellbeing, Candice wants to tackle the issue but is unsure of the way forward. Candice approaches Jason to discuss how they could tackle the issue of low engagement levels among students in the class.

Jason gives a quick overview to Candice of the various mental health and wellbeing initiatives made available from the Department of Education and Training. They decide to co-design activities to strengthen the rapport between Candice and her students and deliver initial lessons on building resilience to the class together as an intervention plan using the Mental Health Planning Tool or the Student Check-in Tool. As a result, Candice gained confidence and knowledge on monitoring behaviour patterns along with a closer relationship with students. During the term, Jason also delivered professional development sessions based on mental health literacy and the importance of early intervention.

In the next term, this helped uncover a cohort of students that faced issues around anxiousness and focus. Candice, with support from Jason during the initial conversations, was able to have constructive discussions with students and their parents. Jason leveraged his external resources and network with community services to recommend appropriate referral pathways.

Figure 2.4(b) Implementing the Mental Health and Wellbeing Leader role for school impact

# How to implement the Mental Health in Primary Schools program

The Department of Education and Training is committed to supporting school leaders to successfully implement the Mental Health in Primary Schools program. Informed by the experience of the pilot, below are some practices that could be adopted by the principal/school leadership and Mental Health and Wellbeing Leader.

## Key considerations for principals and other school leaders

|  |
| --- |
| Recruiting for the Mental Health and Wellbeing Leader   * Principals are encouraged to hire internally where suitable. One of the key factors to success is having someone in the role who is already embedded in the school and understands the culture * Utilise the recruitment support provided by DET: Available resources include a sample template position description, frequently asked questions and answers. You can contact the Mental Health Team via email: mentalhealth@education.vic.gov.au and government schools can call the Department of Education and Training School Recruitment Unit at 1800 641 943 or [schools.recruitment@education.vic.gov.au](mailto:schools.recruitment@education.vic.gov.au). * Consider flexibility in recruitment strategies: Depending on variables like region, FTE hours and the prevailing demand for teachers, consider sharing an Mental Health and Wellbeing Leaders resource with another nearby school(s) (for government schools, this arrangement will be subject to DET’s Staffing Cooperation Policy).   Embedding a Mental Health and Wellbeing Leader in your school   * Understand the scope of the role: Attend inductions, training and the Leadership Community of Practice, where possible, to understand the objectives of this initiative and the scope of the mental health wellbeing leader role. This will support appropriate change communication for improved understanding of the Mental Health in Primary schools program. * Define high-level expectations: Share the school vision and targeted outcomes of the school with the Mental Health and Wellbeing Leader. Focus on developing a partnership and empower them as leaders to assess current school structures and together craft a whole school approach strategy for mental health and wellbeing. |

Figure 3.1 Key considerations for principals and other school leaders

## Tips from existing Mental Health and Wellbeing Leaders

|  |
| --- |
| Getting started in the role   * Understand the wellbeing goals of your school. Access a copy of your school’s Annual Implementation Plan and School Strategic Plan. These plans articulate the school’s goals, wellbeing goals, key improvement strategies and will underpin the focus of your work. * Assess the current state: The training program provides a comprehensive overview. It encourages Mental Health and Wellbeing Leaders invest in understanding and assessing the current state of their school’s mental health and wellbeing structures, and discuss these with their school leadership to determine where effort should be directed for improvements. * Build rapport and advocate for your role with school leadership: It is critical to build a strong relationship with school leadership to design and deliver initiatives that drive changes across the school. School leadership advocacy is critical to ensuring clear and consistent communication to the school community on what the Mental Health and Wellbeing Leader means for existing wellbeing roles and broader changes in the school environment.   Building the capacity of the whole school   * Schedule Professional Development (PD) with small groups: Delivering PD sessions with smaller groups of classroom teachers and support staff allows for better exploration of issues and highly interactive sessions. * Develop a co-design and co-delivery model: The Mental Health and Wellbeing Leader can assist teachers in running activities to help build confidence and upskill their capacity to conduct such activities independently in the future.   Linking in with broader Mental Health reforms   * Mental Health Practitioners are a referral point during transition from primary to secondary. Mental Health and Wellbeing Leaders can reach out to Mental Health Practitioners where appropriate. * Leverage the Planning Tool: Utilise the [Mental Health Planning Tool](https://edugate.eduweb.vic.gov.au/edrms/website/PAL/school-mental-health-planning-tool.pdf), which is designed to help schools better understand the mental health and wellbeing needs of their school and to select programs, staff and resources from the Schools Mental Health Menu. This tool could also help you strategise and understand the required broader mental health initiatives that can be leveraged in your school setting. See more information here.   Getting the most out of Communities of Practice   * Collaborate actively: Prioritise attendance at allocated Area-based Communities of Practice typically share needs and enable Mental Health and Wellbeing Leaders to develop insights through access to learning leaders, clinical expertise, shared ideas, best practices and solutions. |

Figure 3.2 Possible action points for Mental Health and Wellbeing Leaders

## School mental health and wellbeing planning

Mental health and wellbeing planning in schools may include:

* **Longer term mental health and wellbeing outcomes -** generally the longer term objectives that the school aspires to underpinned by the School Strategic Plan (SSP).
* **Short, medium and longer term objectives** that map out how the school plans to achieve its mental health and wellbeing outcomes underpinned by the Annual Implementation Plan and Attitudes to School Student (AtoSS) data
* **A prioritised suite of actions and activities** that enable the school to achieve its short-term priorities. Consideration can also be given to preparation for medium-term objectives.

Principals and other school leaders should work in collaboration with Mental Health and Wellbeing Leader to lead the development of mental health and wellbeing planning. Mental health and wellbeing staff can also be included through active engagement in and contribution to the process.

Schools can consider leveraging existing planning processes in developing School Mental Health and Wellbeing Plans. For example, each school’s Strategic Plan can include the school’s health and wellbeing outcomes and objectives, ensuring that mental health and wellbeing is incorporated into the school’s philosophy, goals, targets and the key improvement strategies for achieving them.

The Annual Implementation Planning process can also be leveraged to record the school’s priorities for the year, including the prioritised suite of actions and activities it will implement to achieve its short-term objectives.

**A worked example:**

One *SSP Wellbeing Goal*, developed by the panel including the SIT and Mental Health and Wellbeing Leader may be to improve wellbeing levels to positively impact learning outcomes

As a result, the *SSP Wellbeing target* could be a 12% increase from the existing level in the Attitude to School Survey (AtoSS) on wellbeing indicators (Confidence, Perseverance, Connectedness, Positive Behaviour, Attendance Attitude etc) over the next 4years.

A *key improvement strategy in an Annual Implementation Plan* could be to focus on a whole school approach to building strong student-teacher relationships that will have an impact on learning to build a yearly growth of 3% on each of those wellbeing indicators.

*Activities* could be:

* two professional development sessions conducted by the mental health wellbeing leader with classroom teachers per term
* co-designing and delivering activities in collaboration with teachers to increase their capacity through practical learning.

Once the school’s mental health and wellbeing priorities are articulated in the Annual Implementation Plan, the school should actively monitor how it is progressing against its plan and whether activities being undertaken are having the expected impact. Where required, schools should refine their plan to ensure it remains fit for purpose.

## Managing change and communications

As with any new program in schools, the way we communicate the change and benefits of the program is key to its success.

### Are you a school principal?

Chat with your wellbeing team and keep them informed. The Mental Health and Wellbeing Leader role is designed to complement the work of the wellbeing teams by driving the implementation and deepening school practices that promote positive student mental health functioning.

### Are you a school leader?

Nominate a committed classroom teacher to attend the Mental Health in Primary School’s training alongside the Mental Health and Wellbeing Leader. The more confident and capable our educators are in mental health and wellbeing, the greater the potential for benefits to be delivered by the program.

Use the following script to share information with your staff about the new program. You can edit the script to suit your school context.

|  |
| --- |
| *Dear staff,*  *As you may be aware, we are excited to announce that [insert name here] will be undertaking the role of Mental Health and Wellbeing Leader this year.*  *This role isn’t designed to be a psychologist or allied health professional. Instead, our new Mental Health and Wellbeing Leader will use their knowledge of teaching and the in-classroom experience to boost the capacity and capability of teachers’ mental health literacy, help support teachers to know when and how to refer students internally within the school and externally to dedicated support services and drive new mental health and wellbeing initiatives across the school.*  *Our wellbeing team will now have more time to support the students who need their support most. Our new Mental Health and Wellbeing Leader will be facilitating key projects and initiatives, such as:*   * *professional learning on mental health literacy, and how to refer students for further support* * *develop, implement and support whole school approaches* * *supporting leadership to plan the use of our Schools Mental Health Fund on the Schools Mental Health Menu.*   *You can find more information on the* Mental Health in Primary Schools program webpage [*here*](https://www.vic.gov.au/mental-health-primary-schools).  *Please feel free to reach out to [insert name here] to learn more about their role, and don’t forget to invite them to your planning meetings.*  *Many thanks,*  *[Email Signature]* |

Figure 3.4 Email communication template

# Implementation support and contact information

Government schools will be supported to implement the Mental Health in Primary Schools program by their respective DET Regional Office’s Mental Health team.

The Regional Mental Health team can:

* provide advice on recruiting and onboarding a Mental Health and Wellbeing Leader
* create links and networks with schools across their Areas
* identify school needs, training and support requirements
* help coordinate professional learning and support for Mental Health and Wellbeing Leaders
* liaise with learning leaders from the Melbourne Graduate School of Education and provide support to the Mental Health and Wellbeing Leader, assist with planning
* assist with facilitating local, face to face Communities of Practice
* provide links with appropriate DET staff
* provide information about mental health initiatives such as the Schools Mental Health Fund and Menu.

The Communities of Practice and training will be facilitated by Learning Leaders from MGSE. The allocated Learning Leader is an important point of contact as they support and coordinate across groups of Mental Health and Wellbeing Leaders in different schools and regions. They also work closely with Mental Health and Wellbeing Leaders of 2 or more years in the Mental Health in Primary Schools program to develop and implement new initiatives to explore additional ways to embed Mental Health in Primary Schools into schools.

You can find further information about the Mental Health in Primary Schools program via the Mental Health in Schools Policy and Advisory Library [here](https://www2.education.vic.gov.au/pal/mental-health-schools/policy). This includes:

* a Mental Health and Wellbeing Leader Position Description template
* frequently asked questions.

Please contact DET Recruitment or Policy and Workplace Relations for relevant advice for your school regarding staffing. For general enquiries regarding the Mental Health in Primary School program, contact the Mental Health team.

Staffing Enquiries

* DET Recruitment

1800 641 943

[schools.recruitment@education.vic.gov.au](mailto:schools.recruitment@education.vic.gov.au)

* DET Policy and Workplace Relations

(03) 7022 001

[workplace.relations@education.vic.gov.au](mailto:workplace.relations@education.vic.gov.au)

General Enquiries

* Mental Health Team

[mentalhealth@education.vic.gov.au](mailto:mentalhealth@education.vic.gov.au)