

# The Cape Primary School

## Mental Health Policy



<b>Approved by:</b>	Provisions Committee	<b>Date:</b> March 2023
<b>Last reviewed on:</b>	July 2025	
<b>Next review due by:</b>	July 2027	

### Change Log:

Date	By Who	Comment
July 2025	S. Baker	Delegated to Provisions committee to approve. Changes made to names of key staff. Changes made to update dates for training etc.

# Mental Health Policy for Cape Primary School July 2025

## Policy Introduction

*'Mental Health is defined as a state of well-being in which every individual recognises his or her own potential, can cope with the normal stress of life, can work productively and fruitfully, and is able to make a contribution to his or her own community'* (World Health Organisation; WHO 2014)

At **Cape Primary School**, we are committed to promoting positive mental health for all pupils. In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. By implementing practical, relevant and effective mental health procedures we can promote an emotionally and physically safe environment for pupils affected both directly and indirectly by mental ill health, thereby ensuring the best possible educational outcomes for every pupil.

We will ensure we are fulfilling our statutory duty to *'promote children's welfare and prevent concerns from escalating'* and *'preventing the impairment of children's mental health and physical health or development'* (Keeping Children Safe in Education).

### **Why Mental Health and Well-Being is Important:**

At our school, we aim to promote positive mental health and well-being for our whole school community; pupils, staff, parents and carers, and recognise how important mental health and emotional well-being is to our lives in just the same way as physical health. We recognise that children's mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. Persistent mental health problems may lead to pupils having significantly greater difficulty in learning than the majority of those of the same age. The Special Educational Needs and Disabilities (SEND) Code of Practice identifies Social, Emotional and Mental Health as one of the four areas of Special Educational Need. All children go through ups and downs through their school career and some face significant life events. About 10% of children aged 5 to 16 have a diagnosable mental health need and these can have an enormous impact on their quality of life, relationships and academic achievement.

The Department for Education (DfE) recognises that: "in order to help their pupils succeed; schools have a role to play in supporting them to be resilient and mentally healthy". Schools can be a place for children and young people to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience. For some, school will be a place of respite from difficult home lives and offer positive role models and relationships, which are critical in promoting pupils well-being and can help engender a sense of belonging and community.

Our role in school is to ensure that they are able to manage times of change and stress, be resilient, are supported to reach their potential and access help when they need it. We also have a role to ensure that pupils learn about what they can do to maintain positive mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues and where they can go if they need help and support.

### **Policy Aims to help and be a school where:**

- Promote positive mental health for all pupils
- Develop resilience amongst pupils and raise awareness of resilience through a whole school approach – Cape 8
- Develop the protective factors which build resilience to mental health problems

- Pupils have a sense of belonging and feel safe
- All pupils are valued
- Pupils feel able to talk openly with trusted adults about their problems without feeling any stigma
- Positive mental health is promoted and valued
- Bullying is not tolerated
- Increased understanding and awareness of common mental health issues so that staff and pupils can take quick and effective action
- Creating an awareness of how to take a graduated response to mental health issues
- parents can get the support and advice
- In addition to children’s well-being, we recognise the importance of promoting staff mental health and well-being.

### **A Whole School Approach to Mental Health**

This policy is shaped around the Public Health England 8 point model; Promoting children and young people’s mental health and wellbeing; A whole school approach document. The policy also includes guidance from the Mental Health and Behaviour in Schools document (DFE 2018)



This policy is for all staff, including non-teaching staff and governors. It should be considered alongside the following relevant policies:

- Safeguarding policy
- Behaviour policy
- Anti-bullying policy
- Staff well-being policy
- First Aid policy
- SEND Code of Practice
- Confidentiality policy
- PSHE and SRE policy/curriculum statement

### **Staff Roles and Responsibilities**

All staff have a responsibility to promote positive mental health. All staff must look out for early warning signs of mental health problems and ensure that pupils with mental health needs are provided with the support they need. When appropriate, all staff are expected to make referrals to key members of staff who have the following specific roles:

- Senior Mental Health Lead. **Staff name:** Wendy Richmond
- Deputy Mental Health Support Practitioners. **Staff names:** Liz Cridge
- Designated Senior Lead for Safeguarding. **Staff name:** Wendy Richmond (1 deputy and 6 L3's)
- PSHE lead or Head of PSHE. **Staff name:** TBC
- Special Educational Needs and Disabilities Co-ordinator (SENDCO). **Staff name:** Wendy Richmond
- Pastoral staff with responsibility for mental health. **Staff name:** Kelly Bedford & Michelle Roberts
- Creative Therapist. **Staff name:** Holly French/Marie Webster (Murray Hall)
- Designated governor for mental health. **Staff name:** Jess Collins (Staff Governor)

If any member of staff is concerned about the mental health of another pupil, they should follow the school safeguarding protocol and fill in a **concerns form** in a swift and timely manner, handing it to the SMHL or deputies/pastoral staff. If, however there is a concern that the pupil is in imminent danger or harm, the schools' safeguarding procedures should be followed and the designated senior safeguarding lead should be notified. If the pupil is presenting as needing immediate medical care, relevant first aid procedures should be followed, including involving the emergency services where necessary. Cape Primary School have a range of staff covering all areas of the school who are either Paediatric First Aid or First Aid trained. At Cape Primary we also have peer support on the playground at break and lunchtimes in the form of:

- Safeguarding Champions
- Playground buddies (KS1)
- Peer Mentors (KS2)

### **Curriculum**

The school will deliver a curriculum which will help pupils understand and regulate their emotions and have a good understanding of what keeps them mentally and physically healthy. They will also learn about the importance of sleep, exercise and eating healthily, how to understand and manage emotions, and how to access support as part of developing resilience. (For further detail please see the PSHE policy). Cohort specific worries and concerns will be included into Personal Social and Health Education (PSHE) and Relationships, Sex and Health Education (RSE). As well as curriculum opportunities, school will use the assembly programme to promote good mental health, resilience and raise awareness of what is available to pupils and parents to support their own well-being.

We believe personal development is at the heart of resilience and confidence, the school will ensure pupils are encouraged to be involved in personal development opportunities and school projects. The school will ensure that all relevant staff have had training on how to teach mental health and relationships, sex and health education confidently. Training and continuing professional development will be available to all staff who teach mental health and will follow the [PSHE Association guidelines on the safe teaching of mental health](#).

### **Current school staff trained:**

Wendy Richmond SMHL Foundation training Dec 2022

Staff training PSHE/SRE.

Further relevant information is available for staff and parents on key aspects of spotting the signs of mental health difficulties and how to promote good mental health on the school's website.

### **Whole school Ethos and Environment**

Positive classroom management and an emotionally safe classroom are part of a healthy whole school ethos and help to promote good behaviours. All staff will ensure that **the welfare and safety of pupils are**

**a priority and we will make reasonable adjustments to the environment in order for pupils who may be struggling with their mental health to succeed both academically and personally.**

Cape Primary School is a safe and affirming place for pupils where they can develop a sense of belonging and talk openly about mental health. Our school has an environment which prevents and tackles bullying (Stop! I don't like it), along with setting out a clear system of rewards and sanctions. See our Behaviour Policy, Class Rules and 'Marvellous Me' reward system.

All staff have a responsibility to promote positive mental health, and to understand the protective and risk factors which are believed to be associated with mental health outcomes. Some pupils will require additional help and all staff should have the skills to look out for any early warning signs of mental health problems and ensure that pupils with mental health needs get early intervention and the support they need. This includes understanding the cumulative effect of risk factors and the protective factors which support good mental health:

**Table 1: Risk and protective factors that are believed to be associated with mental health outcomes**

	<b>Risk factors</b>	<b>Protective factors</b>
<b>In the child</b>	<ul style="list-style-type: none"> <li>• Genetic influences</li> <li>• Low IQ and learning disabilities</li> <li>• Specific development delay or neuro-diversity</li> <li>• Communication difficulties</li> <li>• Difficult temperament</li> <li>• Physical illness</li> <li>• Academic failure</li> <li>• Low self-esteem</li> </ul>	<ul style="list-style-type: none"> <li>• Secure attachment experience</li> <li>• Outgoing temperament as an infant</li> <li>• Good communication skills, sociability</li> <li>• Being a planner and having a belief in control</li> <li>• Humour</li> <li>• A positive attitude</li> <li>• Experiences of success and achievement</li> <li>• Faith or spirituality</li> <li>• Capacity to reflect</li> </ul>
<b>In the family</b>	<ul style="list-style-type: none"> <li>• Overt parental conflict including domestic violence</li> <li>• Family breakdown (including where children are taken into care or adopted)</li> <li>• Inconsistent or unclear discipline</li> <li>• Hostile and rejecting relationships</li> <li>• Failure to adapt to a child's changing needs</li> <li>• Physical, sexual, emotional abuse, or neglect</li> <li>• Parental psychiatric illness</li> <li>• Parental criminality, alcoholism or personality disorder</li> <li>• Death and loss – including loss of friendship</li> </ul>	<ul style="list-style-type: none"> <li>• At least one good parent-child relationship (or one supportive adult)</li> <li>• Affection</li> <li>• Clear, consistent discipline</li> <li>• Support for education</li> <li>• Supportive long term relationship or the absence of severe discord</li> </ul>

	<b>Risk factors</b>	<b>Protective factors</b>
<b>In the school</b>	<ul style="list-style-type: none"> <li>• Bullying including online (cyber)</li> <li>• Discrimination</li> <li>• Breakdown in or lack of positive friendships</li> <li>• Deviant peer influences</li> <li>• Peer pressure</li> <li>• Peer on peer abuse</li> <li>• Poor pupil to teacher/school staff relationships</li> </ul>	<ul style="list-style-type: none"> <li>• Clear policies on behaviour and bullying</li> <li>• Staff behaviour policy (also known as code of conduct)</li> <li>• 'Open door' policy for children to raise problems</li> <li>• A whole-school approach to promoting good mental health</li> <li>• Good pupil to teacher/school staff relationships</li> <li>• Positive classroom management</li> <li>• A sense of belonging</li> <li>• Positive peer influences</li> <li>• Positive friendships</li> <li>• Effective safeguarding and Child Protection policies.</li> <li>• An effective early help process</li> <li>• Understand their role in and be part of effective multi-agency working</li> <li>• Appropriate procedures to ensure staff are confident to can raise concerns about policies and processes, and know they will be dealt with fairly and effectively</li> </ul>
<b>In the community</b>	<ul style="list-style-type: none"> <li>• Socio-economic disadvantage</li> <li>• Homelessness</li> <li>• Disaster, accidents, war or other overwhelming events</li> <li>• Discrimination</li> <li>• Exploitation, including by criminal gangs and organised crime groups, trafficking, online abuse, sexual exploitation and the influences of extremism leading to radicalisation</li> <li>• Other significant life events</li> </ul>	<ul style="list-style-type: none"> <li>• Wider supportive network</li> <li>• Good housing</li> <li>• High standard of living</li> <li>• High morale school with positive policies for behaviour, attitudes and anti-bullying</li> <li>• Opportunities for valued social roles</li> <li>• Range of sport/leisure activities</li> </ul>

## **Mental Health and behaviour in Schools (Nov 2018); Department for Education**

### **Early indicators of possible mental health problems**

All staff need to be aware of the potential early indicators of mental health issues. Negative experiences and distressing life events can affect mental health and can change a pupil's behaviour or levels of distress. These early indicators should always be taken seriously and staff who notice these signs should speak to the Designated Senior Lead for Mental Health.

### **Possible warning signs include:**

- Changes in activity and mood; sadness or withdrawal that lasts at least two weeks or severe mood swings
- Increased isolation away from friends or family or becoming unusually socially withdrawn
- Physical signs of harm that appear non-accidental
- Changes in eating habits including excessive unexplained weight loss or weight gain

- Changes in sleeping habits
- Lowering academic achievement
- Repeated lateness or absence from school
- Repeated physical pain or nausea with no evident cause
- Secretive behaviour
- Abusing drugs or alcohol
- Missing Physical Education or getting changed secretly
- Fearful, withdrawn and poor self-esteem
- Aggressive, coercive, or controlling behaviour
- Indiscriminate contact or affection seeking
- Over friendliness or excessive clinginess
- Expressing feelings of failure, uselessness or helplessness
- Unwilling to talk about feelings
- Finding it hard to concentrate

### **Managing Disclosures**

When a pupil chooses to disclose concerns about themselves, or a friend to any member of staff, the member of staff should remain calm, supportive and non-judgemental. The adult should listen rather than advise in the first instance. All disclosures will be recorded through normal safeguarding procedures and a concerns form to be filled in. This information will be shared with SMHL & DSL; Level 3 Deputies; and other relevant agencies . The following information is important to include:

- Date
- Name of member of staff to whom the disclosure was made
- Nature of the disclosure and main points from the conversation
- Agreed next steps

### **Targeted Support**

We understand that some pupils are at a greater risk of experiencing poorer mental health. For example, looked after and previously looked after children, Children in Need, families living in poverty, young carers, pupils who identify as LGBTQ+ and those pupils identified to have a Special Education Need. We ensure those pupils more at risk of mental health difficulties are provided with in-school support and interventions through teaching staff and the pastoral team.

For pupils whose persistent mental health difficulties mean they would benefit from support from the SEND department, the SENDCO will ensure colleagues understand how the school identifies and meets pupils' needs, provides advice and support to colleagues as needed and liaises with external SEND professionals as necessary.

We will effectively engage with our local early help offer and display relevant sources of effective, evidence-based services and organisations both locally and nationally. The promotion of these services will be through the school website, newsletters, noticeboards and staff room.

In Sandwell and across border in Birmingham, there are a range of organisations and groups offering support, including Murray Hall, Kooth, Sandwell CAMHs, Forward Thinking Birmingham and other providers specialising in providing support for pupil's mental health and well-being.

Further support services include:

- Creative Therapy

- Inclusion Support (SEMH Team and EP)
- Early Help – Targeted Family Support Workers

### Identifying Need and Monitoring impact

When a member of staff suspects that a pupil is struggling with their mental health, they should not delay in putting support in place, using a graduated response:

1. An assessment to establish a clear analysis of the pupil’s needs.
2. A plan to set out how the pupil will be supported
3. Action to provide that support, including where necessary, creating an individual care plan
4. Regular review of the effectiveness of support

The Senior Mental Health Lead and/other organisations will advise appropriate staff on what support and assessment will be most appropriate for the pupil.

In order to support the wellbeing and mental health of all pupils and not wait for crisis, we use the 3 houses or letter to self (depending on the child’s age and ability). We use this to gain an understanding of all pupils mental health, any potential unknown risks factors, historical adversity and any initial difficulties which could be managed and supported. We will screen all KS1 and KS2 pupils via the PASS Survey across the school year to pick up any concerns at this early stage.

### Assessment, interventions and support

The school uses the Boxall profile/PASS Survey/and EBSA assessments when considering the needs of the pupils and to ensure they get the support they need, either from within school or from an external specialist service. Other assessments will be carried out via other professionals specialised recommendations.

At Cape Primary School a graduated **5 tier** response:

Need	Evidence based intervention	Monitoring
<b>Tier 5- High Need</b> (Support at this level usually involves responding to mental health difficulties which are affecting pupils’ quality of life. This includes referral to external services such as SEMH team, BEAM, Our Futures. Or responding to complex or specific mental health needs. This includes referral to GP services, CAMHS and Inclusion Support)	Educational Psychologist involvement, Recommended external services Local Mental Health Services : CAMHs Murray Hall Statutory services Medical services	Individual SDQ Mental Health safety plan Risk Assessment DSL monitoring and family liaison – SG logs Early Help in place - FSW Professionals monitoring Creative Therapist to monitor and offer a referral route to other MH agencies
<b>Tier 4 - Some Need</b> (Support at this level usually involves responding to pupils’ mental health difficulties such as anxiety and depression Support will be carried out by	Access to in school Nurture room small group work 1:1 intervention School counsellor/Therapist Consultation with local services	DSL Safeguarding/Mental Health meeting SG logs Risk assessment – if required Professional monitoring – as required

in- school counsellors or other in school professionals)	Inclusion Support: EP/SAT- SEMH Adult Mentor (B2A)School Health Nurse	Early Help to be offered -FSW to lead School Health monitoring Creative Therapist involvement – family group if needed
<b>Tier 3 -Low Need</b> (Support at this level is a low-level intervention, responding to pupils’ stress and worries. This includes addressing the pupil’s level of need, with a solution-focused approach)	Watching/monitoring brief Check-ins with class teacher Safe space when needed Targeted clubs/activities – lunchtime support; sports clubs DSL & Pastoral team Peer Mentor – 1:1 support Playground Buddy – partnered up School Health Nurse	Discussion with staff members SG logs – DSL overview Creative Therapist drop –in sessions Peer Mentors and Buddies Teachers to report any consistent patterns to SMHL Deputies
<b>Tier 2 – Nurture Need</b> (Support at this level is responding to pupils’ worries and concerns raised or have been observed by staff or family members. This includes addressing the pupil’s level of need, with a solution-focused approach)	Nurture group – phase & year group Circle of friends LEGO Therapy Peer Mentor – check ins Playground Buddy – partnered up Safeguarding Champions – partnered support Transition work (child & parent) – year/phase	Phase Leader/SENCo/Class teachers to monitor through observations Analysis of nurture outcomes as aligned to PASS Survey FSW to liaise with SG Champions to note any patterns of concern Year group buddy and Peer mentor Teachers to monitor & liaise with Mentors & Buddies.
<b>Tier 1 - Universal Need</b> (Support at this level is delivered to all children to help build resilience in response to any worries raised)	Chirpy & Bounce Wellness Pots ‘Stop! I don’t Like it’ – class dialogue Safeguarding Champions Playground Buddies Peer Mentors Assemblies PSHE/SRE lessons Anna Freud ‘Schools in Mind’ resources Worry Boxes PSHE – Kind/compliment books Sign-posting on newsletters and the school website	Teachers to monitor in house tracking of Chirpy and Bounce, wellness pots to notice any patterns emerging for the children in their class. Feedback to Mental Health Deputies

### Individual Safety/Care Plans

When a pupil has been identified as having a mental illness either through a diagnosis, receiving support from specialist mental health services or following a suicide attempt, it is recommended that an individual safety/care plan is developed. The plan should be developed with the pupil, a parent or carer and relevant professionals. Cape Primary School will follow the lead of medical professionals in this area.

The plan could include:

- Information relating to the pupil's diagnosis or presenting issue
- Strategies and support which helps prevent further impairment of pupil's mental health and keeping the environment safe
- Medication
- Who to contact in an emergency
- The role of specific staff within the plan

### **Supporting Peers**

When a pupil is struggling with maintaining good mental health it can be helpful if their friends know how to support them. In certain circumstances as determined by the pastoral team, support will be either one to one or within a group setting where pupils will be provided with some ideas and suggestions how they might best support. This will be done with agreement from the pupil and parents where appropriate.

Conversations it might be helpful to have:

- 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

### **Working with parents**

Pupils and families are not always aware of the mental health support available or what is the most useful resources to support their child's mental health. Information on school based and local services are available on the school website and through newsletters. Furthermore, parents will be made aware of who to talk to in school if they have concerns about their child or a friend of their child.

Cape Primary School will follow good practice to inform and involve families when discussing any initial concerns about a pupil, being mindful that hearing about their child's issues can be upsetting and distressing. As parents may respond in different ways, we will must allow time for parents/families to reflect and discuss issues further. We will signpost parents to good sources of information and support, including a follow up meeting (if parents would like this support).

Cape Primary School will ensure meetings are recorded, including points discussed and actions agreed, with any follow-up discussions which are part of their safeguarding record or in the development of an individual care plan or risk assessment.

### **Parental Consent**

Pupils under the age of 16 need consent from a parent or carer to access treatment or interventions. However, in some circumstances a relevant medical professional may deem that the pupil has sufficient intelligence, competence and understanding to appreciate what is involved in their treatment. This is known as being 'Gillick Competent'. This is by virtue of section 8 of the Family Law Reform Act 1969.

### **Confidentiality**

As part of taking a **whole school approach** to mental health, it may be important to share with other members of staff information about a pupil. This does need to be discussed with the pupil; we will explain

who we are going to talk to, what we are going to tell them and why we need to tell them and agreed next steps.

Sharing disclosures with the senior mental health lead and pastoral team ensures one member of staff is not solely responsible for a pupil. This also ensures continuity of care should there be a staff absence.

### **Positive Mental Health Outcomes for our children where they will:**

- Have a zest for life and the ability to laugh and have fun
- The ability to deal with stress and bounce back from adversity
- The flexibility to embrace and learn new things
- The ability to build and maintain fulfilling relationships
- Self-confidence and high self-esteem
- Aspirations, ambition and no excuses to not fulfil their dreams.

### **Staff Mental Health:**

The school recognises the statutory responsibilities related to employment and that staff have the primary responsibility for their own health and wellbeing, this policy should also be viewed alongside other policies and procedures in relation to duty of care as an employer to all members of staff.

These may include (but are not limited to):

- Attendance and Absence Management Policy;
- Health and Safety Policy;
- Equality of Opportunity Policy;
- Anti-Bullying Policy/Procedure;
- Harassment Procedure;
- Grievance Procedure;
- Whistleblowing Procedure
- The Health and Safety at Work Act 1974
- The Equality Act 2010
- Working Time regulations
- Employment Rights Act 1996
- Employment Relations Act 1999

This policy describes the school's approach to promoting positive staff wellbeing. This policy is intended as guidance for all staff including non-teaching staff and governors. It should be read in conjunction with other relevant school policies.

### **Our Policy aims to support and achieve:**

- To develop a healthy, motivated workforce who are able to deliver a high-standard of education to pupils.
- To help ensure that our school promotes the health and wellbeing of all staff members, recognising the impact work can have on employees' stress levels, mental and physical health.
- Develop and maintain a positive health and safety culture through regular communication and consultation with staff and their trade union representatives on health and safety matters
- To communicate the importance of a work-life balance to all staff, recognising that excessive hours of work can be detrimental to staff health and effectiveness, and to ensure that all policy updates are communicated regularly.
- To encourage staff as individuals to accept responsibility for their own mental, physical and emotional wellbeing.

- To comply with all statutory requirements
- To respond sensitively to external pressures which affect the lives of staff members.
- To provide staff with training to deal positively with stressful incidents and provide them with a sense of confidence to deal with emergencies via training.
- To improve staff development, co-operation and teamwork by creating effective leaders.
- To make staff members aware of the channels which can be used to manage and deal with stress or work-related health and wellbeing issues.

#### **Staff:**

- Will act in a manner that respects the health and safety needs of themselves and others whilst in the workplace and ensure that they do not, through their actions or omissions, create unnecessary work for themselves or colleagues
- Will make themselves aware of all the relevant school policies e.g. Capability, Staff attendance, health and safety.
- Seek support or help if required. This includes understanding that a good relationship requires communication from both parties and therefore is important that issues are raised at the earliest possible moment so that effective strategies can be put in place to manage workloads.
- Consider attending training on health and wellbeing issues where they feel that this is appropriate.
- Will share their views, ideas and feelings about all issues concerning the school at formal meetings and informal gatherings.

#### **Staff Well-Being:**

In school our ethos is to support all staff in all aspects of their wellbeing. In understanding their own mental health, staff need to acknowledge and ask for support when required. At Cape Primary School we provide a lot of well-being supportive measures to help reduce workload and therefore the stress of our staff. These include:

- A birthday day
- Contact line from the LA for direct support with wellness and mental health needs
- Regular and consistent PPA
- Additional time for marking English independent writing
- Curriculum planning outlines for the academic year
- Teacher toolkits
- Subject leader plans
- CPD for Teachers and subject leaders (PDM's)
- Lead professional support in teaching and planning
- Annualised planner to denote what and when will be delivered across the school year and given advance notice to all staff
- Weekly diary in place to support staff in knowing what is happening across the week
- Digital calendar to support knowledge of all yearly events
- Staff Well-Being questionnaires
- Learning Together Day so that staff have a day to meet with parents instead of on top of the daily teaching commitment
- Subject Leaders to guide and support staff with planning and teaching
- Family support workers to help liaise with parents and to carry out all Early Help work – making phone calls on behalf of teaching staff

#### **Policy Review**

This policy will be reviewed every 2 years as a minimum. The next review date is: July 2027

In between updates, the policy will be updated when necessary to reflect local and national changes. This is the responsibility of Wendy Richmond.

Any personnel changes will be implemented immediately.