

Mental Health & Well-being Action Plan 2025-26

Teaching &
Learning











BELONGING

Wellness



The one-year action plan outlines priorities and goals identified in the three-year strategy.

Mental Health and Well-Being

Strategy Plan 2023-26.pdf

(bhncdsb.ca

Commitment

We are committed to mentally healthy learning environments that honour, celebrate and support the identities and lived realities of every student.

We make meaningful connections to life at home and in the community, while promoting hope, resilience, and optimism.

Key messages for 2025-26

We prioritize mental health and well-being as a key condition for every student to learn and flourish.

We do this through:

Relationships: We take the time to create and nurture relationships.

Belonging: We strive to ensure students see their cultures and identities reflected in their school experience.

Teaching & Learning: Staff are provided with training and resources to teach, model and embed mental health promotion and literacy skills with confidence in the classroom.

Engagement: We engage students, parents & caregivers, using cultural humility to lead the way. Student leadership: Students are provided with meaningful mental health leadership opportunities which foster a culture of respect, communication, and active listening. Students feel their ideas and opinions are valued and supported.





Priority Area 1: Identity Affirming Mental Health and Addictions Literacy Teaching and Learning for All

GOAL STRATEGIES IN ACTION **OUTCOMES & MONITORING** Enhance the mental health Provide learning opportunities for administrators 85% of staff who complete the in Trauma-Informed Leadership. post training survey will report an and addictions literacy of increase in competency and staff. Provide Mental Health Literacy course and other confidence in the topics related training to new Child and Youth Worker addressed. staff. Staff will report an increased Provide special education mental health understanding of their role in resources to Special Education Staff available promoting and supporting through School Mental Health Ontario (SMHstudent mental health, and ways to assist students in accessing support. Continue to support educators with mental health curriculum implementation. Enhance the mental health Provide evidence-based identity affirming # of participants receiving resources and training opportunities (virtual and and addictions literacy of information. parents and caregivers. in person) to caregivers at the district and school level in collaboration with community partners 75% of caregivers surveyed will and by using the By Your Side Toolkit. report increased awareness and confidence in being able to School Mental Health Parent/caregiver toolkit to Ontario By Your Side support mental health learning and well-being for every family support their child through conversations regarding mental health and substance use. Bolster the mental health Students to continue to receive mental health 65% of students who participate will report increased competency curriculum content. and addictions literacy of and confidence in topics students. Jack Talk hosted in secondary schools to addressed. enhance student's understanding of mental 100% of schools will report health, how to access care, and remove the Students want their eachers, and their parents/caregivers and families successful implementation of barriers of stigma. mandatory Mental Health Students in Grade 7 & 8 at two pilot schools to curriculum. learn about Balanced Device Use through school CYWs (SMHO-ON resource). # of students who attend Jack Talk. Drug Abuse Resistance Education (DARE) program for Grade 6, 7, 8 students, and 65% of youth who participate in information sessions for secondary students the pilot programs will report available in partnership with Haldimand Norfolk increased competencies. OPP. 85% of students polled through Expand evidence-based substance use EQAO will report they know programming (Pre-Venture) through community where to turn should they have agencies and school CYW. questions related to mental health.

MOWLEDGE AND AD

Priority Area 2: Safe and Mentally Healthy Schools

Wellness for All **GOAL OUTCOMES & MONITORING** STRATEGIES IN ACTION Strengthen capacity Provide learning and consultative opportunities to 90% of administrators and support of administrators to administrators and support staff regarding Traumastaff will report increased confidence lead safe and Informed Leadership, and Shanker Self Regulation. in supporting staff and students mentally healthy through a Trauma-Informed, selfschools. Train-the-Trainer model in Restorative Practices to regulation lens. be initiated, ensuring the ability to build capacity internally. # of restorative training sessions delivered via new trainers. Administrative Procedure re: memorialization to be created to ensure trauma informed, equitable Administrators will report confidence practices. in supporting their school communities through Trauma-Informed responses to loss and memorialization. Enhance capacity Administrators to share their Trauma-Informed School staff will report an increased of school staff to Leadership learnings with school staff through staff understanding and ability to support students through a Trauma-Informed use approaches meetings, communications, resources, and case that support conferences. lens. mentally healthy classrooms/schools Increase implementation of Mind UP in primary # of schools who include Mind Up classes, alongside the SMHO-Wayfinder tool and Wayfinder in school improvement across the district. plans. Child and Youth worker staff to increase capacity Educators will report an increased of school staff by sharing Emotion Validation and confidence in promoting and teaching Shanker Self-Regulation strategies and resources. about, and supporting student mental health through year-end survey data. School Climate Survey data to reflect increase in sense of student wellness and belonging. Increase and Increase in staffing complement of Child and Youth Educators and administrators will Workers to bolster and support the Social report an increase in pro-social support Social Emotional Learning Skills of students within their actions and decrease in aggressive **Emotional Learning** life space so they are better able to manage behaviours in students through yearskills in students. emotion, cope with stressors, develop healthy end survey data. relationships, demonstrate positive conflict resolutions skills, and develop a greater sense of Students will report satisfaction in belonging and well-being. obtaining or progressing towards their mental health goals. # of students supported per school. Critical & Identify & # of students supported through Thinking school team collaboration and a Self-Regulation lens. areness & Self SEL. Coping Confidence Positve Relationships Motivation & Perseverance Communication

Priority Area 3: Early Identification, Prevention & Intervention Wellness for All

| GOAL | STRATEGIES IN ACTION | OUTCOMES & MONITORING |
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| Enhance the knowledge of school staff to understand and recognize signs of mental health concerns in students. | Provide learning opportunities in Suicide Prevention utilizing SMHO-ON resource: Prepare, Prevent, Respond for: -Administrators -Guidance Educators -Chaplains -Student Support Staff (CYW). | Staff will report increased confidence and competence in the ability to: -promote daily wellness -recognize warning signs for suicide -respond if a student tells them they are having thoughts of suicide. |
| Enhance consistent use of evidence informed, brief interventions that use standardized measurement tools. | School based Social Workers use a variety of evidence-based approaches to support the mental health and well-being of students, including: Cognitive Behavioral Therapy (CBT): Helping students recognize and shift negative thought patterns in a structured, supportive way. Mindfulness-Based Stress Reduction (MBSR): Teaching mindfulness techniques to reduce stress and promote emotional balance. Acceptance and Commitment Therapy (ACT): Guiding students to accept their thoughts and feelings while building resilience and coping skills. Suicide Risk Assessment and Management: Identifying students at risk, providing immediate support, and implementing safety plans in collaboration with school staff and families. To ensure students continue receiving the best possible support, the Board provides ongoing training for staff in advanced modules of these therapies and is also incorporating play therapy and Dialectical Behavior Therapy (DBT) approaches. These efforts aim to create a nurturing, responsive environment where every student's mental health is valued and supported. | 80% of contacts will indicate use of Brief clinical interventions. 85% of Board Mental Health Professionals will report an increased confidence in supporting students and school teams. 75% of students who complete the end of year service survey will report satisfaction in progressing towards their mental health goals. 100% of Regulated mental health professionals will be trained, and report increased confidence in supporting students with on-going suicidal ideation. |
| Reduce student absences by 10% year over year. | Revise and improve current attendance and engagement practices with administrators via our work in <i>Leading Mentally Healthy Schools</i> . Senior Leadership will meet with Principals three times per year to review attendance data, conduct audits, and ensure each school has a clear plan with measurable goals. Designated Attendance Counsellor to provide mental health services to students in need; linking up to community services where needed. | 85% of administrators will report increased competency and confidence in engaging students. 100% of schools will submit updated attendance plans following each leadership meeting. Student absentee rate will decline 10% this year from last year. |

Priority Area 4: Partnerships, Student Leadership & Strategic Planning belonging for All

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| GOAL | STRATEGIES IN ACTION | OUTCOMES & MONITORING |
| Strengthen collaboration with community mental health partners to enhance the current coordinated system of care. | Increase understanding and utilization of Right time, Right Care (smho-smso.ca) at community planning tables to ensure most effective usage of Mental Health resources. | Community mental health agencies and Student Support Services will explore and attempt to minimize gaps or overlaps in service-delivery. |
| The Right Time, Right Care Vision for the Child and Youth Mental Health System of Care FOURTHER There were server should be a street of the control of the child and youth should be a street of the control of the child and youth should be a street of the child and youth should be a street of the child and youth should be a street of the child and youth should be a street of the child and youth should be a street of the child and you the should be a street of the | Work with community mental health providers to create a well-articulated resource that reflects the process for students, staff, and families to access board and/or community/hospital mental health services | Every student will receive a 'roadmap of service' resource, outlining service options in schools and the community. |
| | Engage key community partners in Mental Health and Addictions Strategy development. | Mental Health Strategy will reflect an integrated system of care across the tiers of intervention for Child and Youth Mental Health. |
| | Engage in the Planet Youth (Icelandic model of substance prevention) with public health and community partners. | Survey data from Grade 10 students in Haldimand and Norfolk Schools (both boards) will be utilized to inform district and community planning regarding substance use prevention. |
| Enhance opportunities for student leadership and voice in mental health initiatives and services. | Jack Chapters and Wellness and/or ACE groups to be established in each school. Public Health and Student Support Services to assist where possible. Student focus groups and Student Climate Survey to be utilized to assist in the development | 85% of schools will have Jack Chapters/Wellness and/or ACE groups with 75% of participants reporting an increased sense of wellness, social connectedness and inclusion with peers and adult allies/mentors. |
| Did you know? 82% of students indicated they were not involved in mental health initiatives at their school, while 70% wanted to get involved. Find out more about. HeartNowO for 2021 at bit.ly/HearNowONfor2021 | of the Mental Health and Addictions Strategy and other Board and school plans. | School Climate Survey data to reflect increased sense of belonging since last administered. |
| * State Patrice Control | Students receiving school-based mental health services to complete service exit survey. | 75% of students who complete the service exit survey will report satisfaction in progressing |
| | Playground Activity Leaders in Schools (PALS) to be facilitated at participating elementary | towards their mental health goals. |
| | schools in partnership with school staff, CYW and Public Health partners where appropriate. | 50% of schools will participate in PALS. |
| | Playground Activity Leaders in Schools | |

Contributing members of the 2025-26 Mental Health & Well-being action plan

Mental Health Advisory Committee

John Della Fortuna, Superintendent of Education Dianne Wdowczyk-Meade, Mental Health Lead April Taylor, Safe, Inclusive and Equitable Schools Lead Carol Luciani, Trustee

Lori Skye-LaForme, Indigenous Education Advisor
Sandra DeDominicis, Vice-Principal of Inclusive Learning & Special Education
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Amy Pimentel, Principal of Continuing Education
Darren Duff & Tania Flynn, Secondary Principals
Chandra Portelli, System Vice-Principal: Curriculum, Instruction, and
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Andrea Perras, Early Years
Diane Bowie & Rita Martini, System Teachers - ESL
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Cindy Miller & Meghan Adams, Child and Youth Workers
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Christina Farrell, Woodview Mental Health & Autism Services
Irene Perro, Haldimand Norfolk REACH

The Board Mental Health Advisory Committee exists to develop, implement, assist in monitoring, evaluating, and reporting on the achievement of the Board Mental Health Strategy and its annual action plans.

