



# Pupil Mental Health & Wellbeing Policy

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**“Mental health is a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.”**  
(World Health Organization 2014)

Good mental health is important for helping children and young people to develop and thrive academically, socially and emotionally. The Department for Education recognises that schools have an important role to play in supporting the mental health and wellbeing of their pupils, by developing approaches tailored to the particular needs of their pupils.

### 1. Aims

At St Paul's CofE Primary School, we are committed to supporting the mental health and wellbeing of pupils, parents, carers, staff and other stakeholders.

This policy focuses on pupils' mental health and wellbeing. It aims to:

- Set out our school's approach to promoting positive mental health and wellbeing for all pupils across our school
- Provide guidance to staff on their role in supporting pupils' mental health and wellbeing, including how they can foster and maintain an inclusive culture in which pupils feel able to talk about and reflect on their experiences of mental health
- Support staff to identify and respond to early warning signs of mental health issues

- Inform pupils and their parents/carers about the support they can expect from our school in respect of pupils' mental health and wellbeing, and provide them with access to resources

This policy should be read alongside:

- SEND policy
- Behaviour policy
- Anti-bullying policy
- Child protection and safeguarding policy

## 2. Legislation and guidance

This policy was written with regard to:

- [The Equality Act 2010](#)
- [The Data Protection Act 2018](#)
- Articles 3 and 23 of the [UN Convention on the Rights of the Child](#)

## 3. Roles and responsibilities

All staff are responsible for promoting positive mental health and wellbeing across our school and for understanding risk factors. However, if any members of staff are concerned about a pupil's mental health or wellbeing, they should inform the Designated Safeguarding Lead (DSL)/Mental Health Lead or Pastoral Assistant (also DDSL).

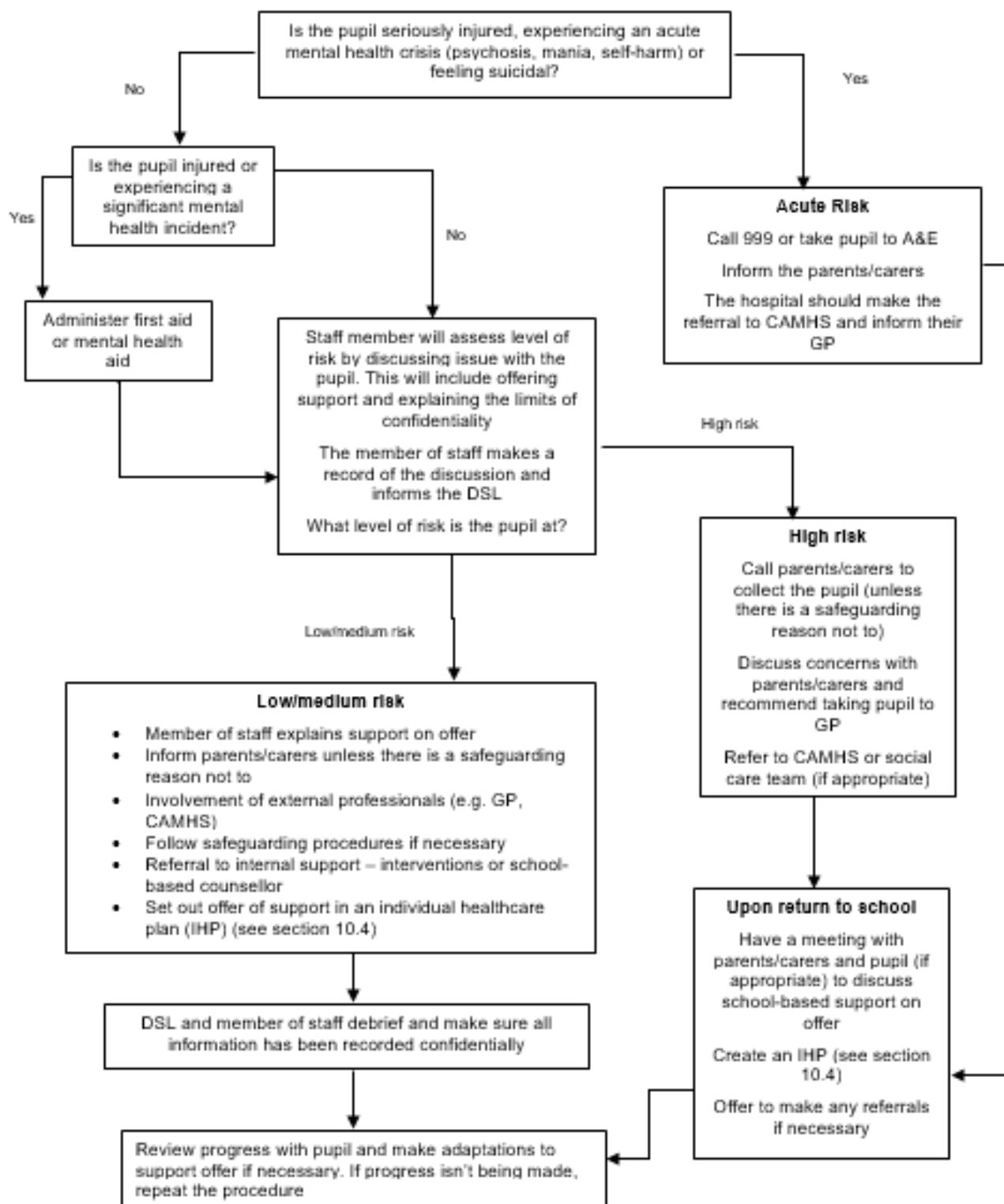
If there is a fear that the pupil is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the Designated Safeguarding Lead / Headteacher. If the pupil presents a medical emergency then the normal procedures for medical emergencies should be followed, including alerting the first aid staff and contacting the emergency services if necessary.

Where a referral to CAMHS is appropriate, this will be led and managed by the Designated Safeguarding Lead/SENDCo/Senior Mental Health Lead.

Certain members of staff have extra duties to lead on mental health and wellbeing in school. These members of staff include:

- Headteacher – Mrs Jen Ferretti
- Designated safeguarding lead (DSL) – Mrs Jen Ferretti  
Mr Lee Davis-Powell/Miss Dani Woods/Ms Bryanie Clarke  
– DDSLs)
- Special educational needs co-ordinator (SENCO) – Mrs Laura Evans
- Pastoral / Family Support Assistant – Miss Dani Woods
- Mental Health First Aiders – Mrs Jen Ferretti and Mrs Jan Pooler
- PSHE leader – Mrs Korrene Honeyghan

#### 4. Procedure to follow in a case of acute mental health crisis



## 5. Warning signs

All staff will be on the lookout for signs that a pupil's mental health is deteriorating. Some warning signs include:

- Changes in:
  - Mood or energy level
  - Eating or sleeping patterns
  - Attitude in lessons or academic attainment
  - Level of personal hygiene
- Social isolation
- Poor attendance or punctuality
- Expressing feelings of hopelessness, anxiety, worthlessness or feeling like a failure
- Abuse of drugs or alcohol
- Rapid weight loss or gain
- Secretive behaviour
- Covering parts of the body that they wouldn't have previously
- Refusing to participate in P.E. or being secretive when changing clothes
- Physical pain or nausea with no obvious cause
- Physical injuries that appear to be self-inflicted
- Talking or joking about self-harm or suicide

The SEND Code of Practice states - Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.

## 6. Managing disclosures

If a pupil makes a disclosure about themselves or a peer to a member of staff, staff should remain calm, non-judgmental and reassuring.

Staff will focus on the pupil's emotional and physical safety, rather than trying to find out why they are feeling that way or offering advice.

Staff will always follow our school's safeguarding policy and pass on all concerns to the DSL/Mental Health Lead. All disclosures are recorded on CPOMS.

When making a record of a disclosure, staff will include:

- The full name of the member of staff who is making the record
- The full name of the pupil(s) involved
- The date, time and location of the disclosure
- The context in which the disclosure was made
- Any questions asked or support offered by the member of staff

### **7. Confidentiality**

Staff will not promise a pupil that they will keep a disclosure secret – instead they will be upfront about the limits of confidentiality.

A disclosure cannot be kept secret because:

- Being the sole person responsible for a pupil's mental health could have a negative impact on the member of staff's own mental health and wellbeing
- The support put in place for the pupil will be dependent on the member of staff being at school
- Other staff members can share ideas on how to best support the pupil in question

Staff should always share disclosures with at least 1 appropriate colleague. This will usually be the DSL/Mental Health Lead. If information needs to be shared with other members of staff or external professionals, it will be done on a need-to-know basis.

Before sharing information disclosed by a pupil with a third party, the member of staff will discuss it with the pupil and explain:

- Who they will share the information with
- What information they will share
- Why they need to share that information

Staff will attempt to receive consent from the pupil to share their information, but the safety of the pupil comes first.

Parents/carers will be informed unless there is a child protection concern. In this case the Child Protection/ Safeguarding Policy will be followed.

#### **7.1 Process for managing confidentiality around disclosures**

1. Pupil makes a disclosure
2. Member of staff offers support
3. Member of staff explains the issues around confidentiality and rationale for sharing a disclosure with DSL / Mental Health Lead
4. Member of staff will attempt to get the pupil's consent to share – if no consent is given, explain to the pupil who the information will be shared with and why

5. Member of staff will record the disclosure on CPOMS and share the information with the chosen elected member of staff
6. The DSL / Mental Health Lead will inform the parent/carer (if appropriate) and decide on support / next steps.
7. Any other relevant members of staff or external professionals will be informed on a need-to-know basis

## 8. Supporting pupils

### 8.1 Baseline support for all pupils

As part of our school's commitment to promoting positive mental health and wellbeing for all pupils, our school offers support to all pupils by:

Raising awareness of mental health during whole school / class based worship, the PSHE curriculum and mental health awareness week

- Signposting all pupils to sources of online support on our school website
- Creating a positive culture where children and adults are able to discuss mental health openly.
- Open discussions about mental health during lessons
- Providing pupils with avenues to provide feedback on any elements of our school that is negatively impacting their mental health
- Monitoring all pupils' mental health through assessments, e.g. a strengths and difficulties questionnaire
- Appointing a Senior Mental Health Lead with a strategic oversight of our whole school approach to mental health and wellbeing
- Offering Family and Pastoral support and check ins
- Use Zones of Regulation to develop emotional literacy across school
- Working with Reflexions to offer parent workshops, whole school assemblies and events, class based workshops.
- Making classrooms a safe space to discuss mental health and wellbeing through interventions such as:
  - Worry boxes
  - Circle time
  - A range of high quality texts and stories written to support and promote positive mental health.

## 8.2 Assessing what further support is needed

If a pupil is identified as having a mental health need, the SENCo/Senior Mental Health Lead will take a graduated and case-by-case approach to assessing the support our school can provide, further to the baseline support detailed above in section 8.1.

Our school will offer support in cycles of:

- Assessing what the pupil's mental health needs are
- Creating a plan to provide support
- Taking the actions set out in the plan
- Reviewing the effectiveness of the support offered

## 8.3 Internal mental health interventions

Where appropriate, a pupil will be offered support that is tailored to their needs as part of the graduated approach detailed above. The support offered at our school includes:

List here any interventions you run internally to support pupils experiencing poor mental health, e.g.:

- Nurture groups
- Reduced timetable
- Time-out pass
- Counselling
- Reflexions group support and targeted 1-1 support with a mental health support worker
- Use the EBSNA pathway toolkit to identify barriers to school attendance
- Pastoral support including Talking and Drawing therapy
- Huggle Pets Animal Assisted Therapy

## 8.4 Individual action / support plans

A pupil may be offered support through Early Help or a Wellbeing / Mental Health Action Plan. Action plans are written in collaboration with the pupil (if appropriate), their parent/carer, and any other relevant professionals.

The pupil's plan will contain the following details:

Adapt this to suit your school's policy/procedure and your school's context:

- The mental health issue (and its triggers, signs, symptoms and treatments)
- The pupil's needs resulting from the condition
- Specific support for the pupil's educational, social and emotional needs
- The level of support needed
- Who will provide the support
- Who in our school needs to be aware of the child's condition
- What to do in an emergency



### 8.5 Making external referrals

If a pupil's needs cannot be met by the internal offer our school provides, our school will make, or encourage parents/carers to make, a referral for external support.

A pupil could be referred to:

- Their GP or a paediatrician
- Base 25
- CAMHS
- Mental health charities (e.g. [Samaritans](#), [Mind](#), [Young Minds](#), [Kooth](#))
- Local counselling services

### 9. Supporting and collaborating with parents/carers

We will work with parents/carers to support pupils' mental health by:

- Asking parents/carers to inform us of any mental health needs their child is experiencing, so we can offer the right support
- Informing parents/carers of mental health concerns that we have about their child
- Highlighting sources of information and support about mental health and wellbeing on our school website, including the mental health and wellbeing policy
- Liaising with parents/carers to discuss strategies that can help promote positive mental health in their child
- Providing guidance to parents/carers on navigating and accessing relevant local mental health services or other sources of support (e.g. parent/carer forums)
- Keeping parents/carers informed about the mental health topics their child is learning about in PSHE, and share ideas for extending and exploring this learning at home
- Engaging with parents/carers to understand their mental health and wellbeing issues, as well as that of their child, and support them accordingly to make sure there is holistic support for them and their child
- Supporting families through Early Help / signposting to support where there are concerns around the mental health of a parent.

When informing parents/carers about any mental health concerns we have about their child, we will endeavour to do this face-to-face.

These meetings can be difficult, so our school will ensure that parents/carers are given time to reflect on what has been discussed, and that lines of communication are kept open at the end of the meeting.

A record of what was discussed, and action plans agreed upon in the meeting will be recorded and added to the pupil's CPOMS record.

If appropriate, an individual action plan will be created in collaboration with parents/carers.

## 10. Supporting peers

Watching a friend experience poor mental health can be very challenging for pupils. Pupils may also be at risk of learning and developing unhealthy coping mechanisms from each other.

We will offer support to all pupils impacted by mental health directly and indirectly. We will review the support offered on a case-by-case basis. Support might include:

- Strategies they can use to support their friends
- Things they should avoid doing/saying
- Warning signs to look out for
- Signposting to sources of external support

## 11. Signposting

Sources of support are displayed around our school and linked to on our school website, so pupils and parents/carers are aware of how they can get help.

The Senior Mental Health Lead and Pastoral Assistant are able to provide further information to pupils and parents/carers if they want to learn more about what support is available.

## 12. Whole school approach to promoting mental health awareness

### 12.1 Mental health awareness and understanding is taught in PSHE

At St Paul's CofE Primary School, we follow the Jigsaw PSHE scheme of work.

Pupils are taught to:

- Develop healthy coping strategies
- Challenge misconceptions around mental health
- Develop resilience
- Recognise, name and understand their own emotional state and the emotions of others
- Keep themselves safe

For more information, visit our PSHE area of the school website.

### 12.2 Creating a positive atmosphere around mental health

Staff will create an open culture around mental health by:

- Discussing mental health with pupils in order to break down stigma
- Encouraging pupils to disclose when their mental health is deteriorating

## 13. Training

All staff will be offered training so they:

- Have a good understanding of what pupils' mental health needs are

- Know how to recognise warning signs of mental ill health
- Know a clear process to follow if they identify a pupil in need of help
- Understand the impact of Attachment Difficulties and Trauma as well as Adverse Childhood Experiences (ACEs)

#### 14. Support for staff

We recognise that supporting a pupil experiencing poor mental health can affect that staff member's own mental health and wellbeing. To help with this we will:

Outline the support offered to staff, e.g.

- Treat mental health concerns seriously
- Offer staff supervision sessions
- Support staff experiencing poor mental health themselves
- Create a pleasant and supportive work environment
- Offer an employee assistance programme

For further information, refer to our Staff Mental Health and Wellbeing Policy.

#### 15. Monitoring arrangements

This policy will be reviewed bi-annually or sooner by Jennifer Ferretti (Headteacher). At every review, it will be shared with the Full Governing Body.

#### Appendix A -

##### Sources of Support

Young Minds [www.youngminds.org.uk](http://www.youngminds.org.uk) - children and young people's mental health

Mind [www.mind.org.uk](http://www.mind.org.uk) – children and young people's mental health

MindEd [www.minded.org.uk](http://www.minded.org.uk) – a free educational resource on children and young people's mental health for adults

Time to Change [www.time-to-change.org.uk](http://www.time-to-change.org.uk) - tackles the stigma of mental health

Rethink Mental Illness [www.rethink.org](http://www.rethink.org) - challenges attitudes towards mental health

Mental Health Foundation <https://www.mentalhealth.org.uk/>

Together <https://www.together-uk.org/> - a leading mental health charity

The Centre for Mental Health <https://www.centreformentalhealth.org.uk/>

BACP Find a Therapist <https://www.bacp.co.uk/search/Therapists>

Education Support Partnership <https://www.educationsupport.org.uk/> - charity specialising in improving the health and wellbeing of teachers, teaching assistants, headteachers and support staff in schools

Anxiety UK <https://www.anxietyuk.org.uk/>

Cruse Bereavement Care <https://www.cruse.org.uk/> support to children, young people and adults when someone dies

## **Appendix B:** Talking to pupils when they make mental health disclosures

The advice below is based on the ALGEE approach to support staff in initial conversations with pupils when they disclose mental health concerns.

A = Approach (Have a conversation and be sensitive)

L = Listen (Don't interrupt, let the other person speak and don't judge)

G = Give Support (Treat with respect and give practical help)

E = Encourage (To speak to a staff member)

E = Encourage (To speak to family/friends and other agencies/helplines)

Focus on listening

If a pupil has come to you, it's because they trust you and feel a need to share their difficulties with someone. Let them talk. Ask occasional open questions if you need to in order to encourage them to keep exploring their feelings and opening up to you. Just letting them pour out what they're thinking will make a huge difference and marks a huge first step in recovery. Up until now they may not have admitted even to themselves that there is a problem.

Don't talk too much

The pupil should be talking at least three quarters of the time. If that's not the case then you need to redress the balance. You are here to listen, not to talk. Sometimes the conversation may lapse into silence. Try not to give in to the urge to fill the gap, but rather wait until the pupil does so. This can often lead to them exploring their feelings more deeply. Of course, you should interject occasionally, perhaps with questions to the pupil to explore certain topics they've touched on more deeply, or to show that you understand and are supportive. Don't feel an urge to over-analyse the situation or try to offer answers. This all comes later. For now your role is simply one of supportive listener. So make sure you're listening!

Don't pretend to understand

The concept of a mental health difficulty such as an eating disorder or obsessive compulsive disorder (OCD) can seem completely alien if you've never experienced these difficulties first hand. You may find yourself wondering why on earth someone would do these things to themselves, but don't explore those feelings with the sufferer. Instead listen hard to what they're saying and encourage them to talk and you'll slowly start to understand what steps they might be ready to take in order to start making some changes.

Don't be afraid to make eye contact

It's important to try to maintain a natural level of eye contact (even if you have to think very hard about doing so and it doesn't feel natural to you at all). If you make too much eye contact, the student may interpret this as you staring at them. They may think that you are horrified about what they are saying or think they are a 'freak'. On the other hand, if you don't make eye contact at all then a student may interpret this as you being disgusted by them – to the extent that you can't bring yourself to look at them. Making an effort to maintain natural eye contact will convey a very positive message to the pupil.

### Offer support

Never leave this kind of conversation without agreeing next steps. These will be informed by your conversations with appropriate colleagues and the schools' policies on such issues. Whatever happens, you should have some form of next steps to carry out after the conversation because this will help the student to realise that you're working with them to move things forward.

### Acknowledge how hard it is to discuss these issues

It can take a young person weeks or even months to admit they have a problem to themselves, let alone share that with anyone else. If a pupil chooses to confide in you, you should feel proud and privileged that they have such a high level of trust in you. Acknowledging both how brave they have been, and how glad you are they chose to speak to you, conveys positive messages of support to the pupil.

### Don't assume that an apparently negative response is actually a negative response

Despite the fact that a pupil has confided in you, and may even have expressed a desire to get on top of their illness, that doesn't mean they'll readily accept help. The illness may ensure they resist any form of help for as long as they possibly can. Don't be offended or upset if your offers of help are met with anger, indifference or insolence, it's the illness talking, not the student.

### Never break your promises

Above all else, a pupil wants to know they can trust you. That means if they want you to keep their issues confidential and you can't then you must be honest. Explain that, whilst you can't keep it a secret, you can ensure that it is handled within the school's policy of confidentiality and that only those who need to know about it in order to help will know about the situation. You can also be honest about the fact you don't have all the answers or aren't exactly sure what will happen next. Consider yourself the pupil's ally rather than their saviour and think about which next steps you can take together, always ensuring you follow relevant policies and consult appropriate colleagues