



Policy Statement

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 Organisation)

In our school our Christian vision shapes all we do.

Mission Statement: *Unlock every child's potential as a unique child of God*

Our aim is to ensure that every child's unique strengths are celebrated and strengthened alongside gaining an excellent academic, social, emotional and physical education.

At Shenfield St Mary's Primary School, we aim to promote positive mental health and wellbeing for our whole school community (children, staff, parents and carers) and recognise how important mental health and emotional wellbeing 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. All children go through ups and downs during their school career and some face significant life events. In 2017, about 1 in 10 children aged 5 to 16 had a diagnosable mental health need and these can have an enormous impact on quality of life, relationships and academic achievement.

The Department for Education (DfE) recognises that: "In order to help their children 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 children's wellbeing and can help engender a sense of belonging and community.

In addition, we aim to promote positive mental health for every member of our staff and pupil body. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable pupils and staff.

As well as promoting positive mental health and wellbeing, we aim to recognise and respond to need as it arises. By developing and implementing practical, relevant and effective mental health and wellbeing policies and procedures we can promote a safe and stable environment for pupils affected both directly, and indirectly by mental health and wellbeing issues.

What our policy aims to do:

Our role in school is to ensure that children are able to manage times of change and stress, and that they are supported to reach their potential or access help when they need it. We also have a role to ensure that children 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. Our aim is to help develop the protective factors which build resilience to mental health problem and to be a school where:

- All children and staff are valued.
- All children and staff have a sense of belonging and feel safe.
- Children, parents, carers and staff feel able to talk openly with trusted adults about their problems without feeling any stigma.

- We alert staff to early warning signs of poor mental health and wellbeing
- Positive mental health is promoted and valued.
- Bullying is not tolerated.
- We provide support to staff working with young people with mental health and wellbeing issues

Lead Members of Staff

Whilst all staff have a responsibility to promote the mental health of pupils, staff with a specific, relevant remit include:

Sally Taggart – Head Teacher - Designated Safeguarding Lead (DSL)

Liz Bundy –Deputy Head Teacher and Inclusion Leader - Mental Health and Emotional Wellbeing Lead

Sam Mellish - Lead First Aider

Loretta Peck – PSHE Lead

Sophie Chandler – P.E. and Daily Mile Lead

Any member of staff who is concerned about the mental health or wellbeing of a pupil should speak to the Mental Health Lead in the first instance. If there is a fear that the pupil is in danger of immediate harm, then the normal child protection and safeguarding procedures should be followed with an immediate referral to the Designated Safeguarding Lead (DSL). 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 an external referral is made the Mental Health Lead will manage this. External referrals can include: The North East London NHS Foundation Trust (NELFT.) Guidance about referring to NELFT is provided on the NELFT website: <https://mindfresh.nelft.nhs.uk/>. Or a referral to the Child and Adolescent Mental Health Service (CAMHS) may also be relevant. Guidance about referring to CAMHS can be found on the NHS website: <https://www.nhs.uk/using-the-nhs/nhs-services/mental-health-services/child-and-adolescent-mental-health-services-camhs/>

Individual Health Care Plans (IHCP)

It is helpful to draw up an individual care plan for pupils causing concern or who receive a diagnosis pertaining to their mental health. This should be drawn up involving the pupil, the parents and relevant health professionals. This can include:

- Details of a pupil's condition
- Special requirements and precautions (including triggers)
- Medication and any side effects
- What to do, and who to contact in an emergency
- The role the school can play

Teaching about Mental Health and Wellbeing

Mental health and wellbeing is not just the absence of mental health problems. We want all children/young people to:

- feel confident in themselves.
- be able to express a range of emotions appropriately.
- be able to make and maintain positive relationships with others.
- cope with the stresses of everyday life.
- manage times of stress and be able to deal with change.

- learn and achieve.

The skills, knowledge and understanding needed by our pupils to keep themselves and others physically and mentally healthy and safe are included as part of our developmental PSHE curriculum. This includes the use of the 'Jigsaw' scheme which perfectly connects the pieces of Personal, Social and Health Education, emotional Literacy, social skills and spiritual development.

The specific content of lessons will be determined by the specific needs of the cohort we're teaching but there will always be an emphasis on enabling pupils to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

We follow the PSHE Association Guidance to ensure that we teach mental health and emotional wellbeing issues in a safe and sensitive manner which helps rather than harms.

Signposting

We will ensure that staff, pupils and parents are aware of sources of support within school and in the local community. This is aimed at and how to access it is outlined on our Mental Health and Well Being tab on the schools website: <https://www.shenfieldstmarys.co.uk/mental-health-and-well-being/>

We will display relevant sources of support in communal areas and will regularly highlight sources of support to pupils and staff within relevant parts of the curriculum and in our Professional Development Meetings (PDM.) Whenever we highlight sources of support, we will increase the chance of help-seeking by ensuring individuals (Pupils, parents, cares and staff) understand:

- What help is available
- Who it is aimed at
- How to access it
- Why to access it
- What is likely to happen next

Warning Signs

School staff may become aware of warning signs which indicates an individual is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously (could possibly be linked to a child protection issue) and staff observing any of these warning signs should communicate their concerns with our Mental Health and Emotional Wellbeing Lead or DSL.

Possible warning signs include:

- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating / sleeping habits
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood
- Lowering of academic achievement
- Talking or joking about self-harm or suicide
- Abusing drugs or alcohol
- Expressing feelings of failure, uselessness or loss of hope
- Changes in clothing – e.g. long sleeves in warm weather

- Secretive behaviour
- Skipping PE or getting changed secretly
- Lateness to or absence from school
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism

Managing disclosures

A pupil or staff member may choose to disclose concerns about themselves or a friend/colleague, staff need to know how to respond appropriately to a disclosure. If an individual chooses to disclose concerns about their own mental health or that of a friend/colleague the member of staff's response should always be calm, supportive and non-judgemental. Staff should listen, rather than advise and our first thoughts should be of the individual's emotional and physical safety rather than of exploring 'Why?'

All disclosures by a member of staff about themselves/colleague should be initially informally noted and the member of staff supported appropriately, signposted to The Schools Advisory Service (SAS) and a follow up meeting arranged. A referral to Occupational Health (OH) will be made if the need is there where advice will be sought and guidance given.

All disclosures by a pupil should be recorded in writing (on the schools Cause for Concern form) and held on the pupil's confidential file. This written record should include:

- Date
- The name of the member of staff to whom the disclosure was made
- Main points from the conversation
- Agreed next steps This information should be shared with the mental health lead who will monitor, store the record appropriately and offer support and advice about next steps.

Confidentiality

We should be honest with regards to the issue of confidentiality. If we feel it is necessary for us to pass our concerns about a pupil on then we should discuss with the pupil:

- Who we are going to talk to
- What we are going to tell them
- Why we need to tell them

We should never share information about a pupil without first telling them. Ideally we would receive their consent, though there are certain situations when information must always be shared with another member of staff and / or a parent. Particularly if a pupil is in danger of harm.

It is always advisable to share disclosures with a colleague, usually the Mental Health and Emotional Wellbeing Lead, this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the pupil, it ensures continuity of care in our absence and it provides an extra source of ideas and support. We should explain this to the pupil and discuss with them who it would be most appropriate and helpful to share this information with.

Parents should be informed if there are concerns about their mental health and wellbeing and pupils may choose to tell their parents themselves. We should always give pupils the option of us informing parents for them or with them. However, if a child gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but the Designated Safeguarding Lead (DSL) must be informed immediately.

Working with Parents

Where it is deemed appropriate to inform parents, we need to be sensitive in our approach. Before disclosing to parents we should consider the following questions (on a case by case basis):

- Can the meeting happen face to face? This is preferable.
- Where should the meeting happen? At school, at their home or somewhere neutral?
- Who should be present? Consider parents, the pupil, other members of staff.
- What are the aims of the meeting?

It can be shocking and upsetting for parents to learn of their child's issues and many may respond with anger, fear or upset during the first conversation. We should be accepting of this (within reason) and give the parent time to reflect.

We should always highlight further sources of information and give them information to take away or have access to (parent helplines and forums) where possible, sharing sources of further support aimed specifically at parents can be helpful, as they will often find it hard to take much in whilst coming to terms with the news that you're sharing. We should always provide clear means of contacting us with further questions and consider booking in a follow up meeting or phone call right away as parents often have many questions as they process the information. Finish each meeting with agreed next step and always keep a brief record of the meeting on the child's confidential record.

Working with All Parents

Parents are often very welcoming of support and information from the school about supporting their children's emotional and mental health. In order to support parents, we will:

- Highlight sources of information and support about common mental health issues on our school website
- Ensure that all parents are aware of who to talk to, and how to get about this, if they have concerns about their own child or a friend of their child
- Make our mental health policy easily accessible to parents
- Share ideas about how parents can support positive mental health in their children through our regular information evenings
- Keep parents informed about the mental health topics their children are learning about in PSHE and share ideas for extending and exploring this learning at home

Supporting Peers

When a pupil is suffering from mental health issues, it can be a difficult time for their friends. Friends often want to support but do not know how. In the case of self-harm or eating disorders, it is possible that friends may learn unhealthy coping mechanisms from each other. In order to keep peers safe, we will consider on a case by case basis which friends may need additional support. Support will be provided either in one to one or group settings and will be guided by conversations by the pupil who is suffering and their parents with whom we will discuss:

- What it is helpful for friends to know and what they should not be told
- How friends can best support
- Things friends should avoid doing / saying which may inadvertently cause upset
- Warning signs that their friend 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

Training

As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular child protection training in order to enable them to keep pupils safe.

The MindEd learning portal provides free online training suitable for staff wishing to know more about a specific issue. Our online training platform also Educare offers up to date training on mental health and well being.

Training opportunities for staff who require more in-depth knowledge will be considered as part of our performance management process and additional CPD will be supported throughout the year where it becomes appropriate due developing situations with one or more pupils.

Where the need to do so becomes evident, we will host twilight training sessions for all staff to promote learning or understanding about specific issues related to mental health.

Policy Review

This policy will be reviewed every 3 years as a minimum. It is next due for review in Spring Term 2026.

Additionally, this policy will be reviewed and updated as appropriate on an ad hoc basis. If you have a question or suggestion about improving this policy, this should be addressed to Liz Bundy, Deputy Head Teacher, our mental health lead via email admin@shenfield-st-marys.essex.sch.uk.

This policy will always be immediately updated to reflect personnel changes.