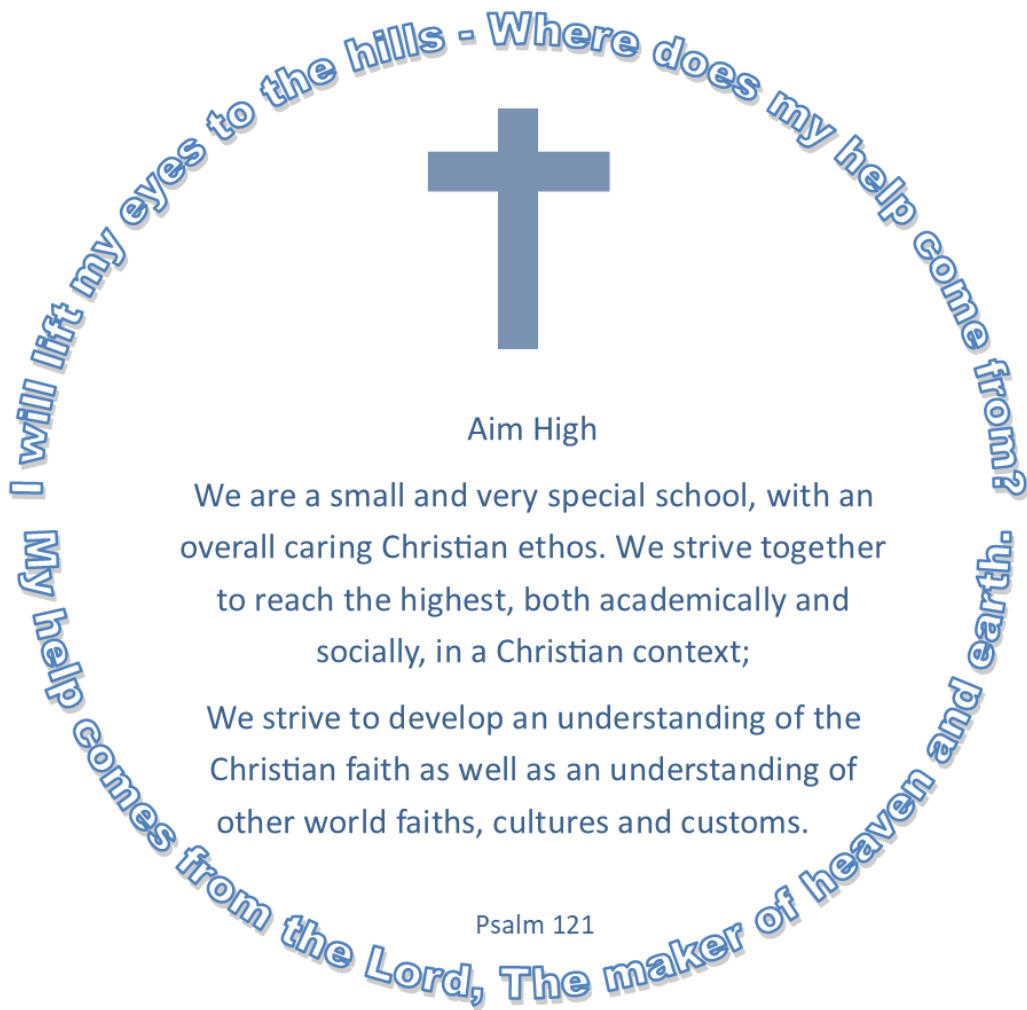


# **Mental Health and Wellbeing Policy**



## **Clive Church of England Primary School and Nursery**

**To be reviewed: September 2025**



***Respect, Responsibility, Resilience***

Clive CE Primary School and Nursery is committed to safeguarding and promoting the welfare of children and adults at all times and expects everybody working with us to share this commitment.

## **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 Organization)*

In our school our view is that education is for life in all its fullness.

We strive to create an environment in which all will feel valued and secure and develop a love of learning. Every child is encouraged to care for, respect and appreciate others, developing positive relationships as they take their first steps towards becoming responsible, thoughtful and confident adults.

As a 'Church of England' school, we believe it is important to develop core values by which to live and which help to develop a moral and spiritual awareness. We seek to explore the meanings of the core values and their significance through weekly acts of worship. The gifts of 'respect, responsibility and resilience,' are the values we wish our children to leave with.

In addition, we aim to promote positive mental health for every member of our staff and our children. We pursue this aim using both universal, whole school approaches and specialised, targeted approaches aimed at vulnerable children. In addition to 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 children affected both directly, and indirectly by mental health and wellbeing issues.

## **Scope**

This document describes our school's approach to promoting positive mental health and wellbeing. This policy is intended as guidance for all staff including non-teaching staff and governors.

This policy should be read in conjunction with our medical policy in cases where a child's mental health and wellbeing overlaps with or is linked to a medical issue and the SEND policy where a child has an identified special educational need.

The policy aims to:

- promote positive mental health and wellbeing in all staff and children;
- increase understanding and awareness of common mental health issues;
- alert staff to early warning signs of poor mental health and wellbeing;
- provide support to staff working with children with mental health and wellbeing issues;
- provide support to pupils suffering mental ill health and their peers and parents/carers.

Any member of staff who is concerned about the mental health or wellbeing of a child should speak to the Assistant Headteacher, in the first instance. If there is a fear that the child is in danger of immediate harm then the normal child protection procedures should be followed with an immediate referral to the Designated Safeguarding Lead. If the child 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 Bee U is appropriate, this will be led and managed by the Senco. Guidelines for referrals to support services are detailed in Appendix 1. Children aged 11 can access Kooth which is a free confidential support and counselling service <http://www.kooth.com/>

Children and young people of all ages and their parents can access any of The Children Society's drop-in sessions – BEAM, without an appointment or referral. Here they can talk to an experienced practitioner who will listen to and support them with any challenges facing them regarding emotional health and wellbeing. BEAM also offer several workshops focusing on a specific issues. Information on the location and days BEAM operates can be found [on the Shropshire Family Information Directory](#).

More specialist mental health support can be gained via the Access Team for the BeeU Emotional Health and Wellbeing Service. Professionals and staff working with children and young people can contact the Access Team for a consultation or advice on the most appropriate direction of support. The Access Team can be contacted by phoning 0808 196 4501 option 1.

### **Individual Care Plans**

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

- details of a child's condition;
- special requirements and precautions;
- 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**

The skills, knowledge and understanding needed by our children to keep themselves and others physically and mentally healthy and safe are included as part of our developmental PSHE curriculum.

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

We will follow the PSHE Association Guidance to ensure that we teach mental health and emotional wellbeing issues, in a safe and sensitive manner.

## **Signposting**

We will ensure that staff, children and parents are aware of sources of support within school and in the local community. What support is available within our school and local community, who it is aimed at and how to access it is outlined in Appendix 2.

We will display relevant sources of support in communal areas and on our website and will regularly highlight sources of support to children within relevant parts of the curriculum. Whenever we highlight sources of support, we will increase the chance of children help-seeking by ensuring children understand:

- what help is available;
- who it is aimed at;
- how to access it;
- why it may be necessary to access it;
- what is likely to happen next.

## **Warning Signs**

School staff may become aware of warning signs which indicate a child is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with the assistant headteacher/headteacher.

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;
- repeated physical pain or nausea with no evident cause;
- an increase in lateness or absenteeism.

## **Managing disclosures**

A child may choose to disclose concerns about themselves or a friend to any member of staff so all staff need to know how to respond appropriately to a disclosure.

If a child chooses to disclose concerns about their own mental health or that of a friend to a member of staff, 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 child's emotional and physical safety rather than of exploring 'Why?'

If a child presents themselves with concerns about self-harm, the immediate response is to remain calm. The member of staff should indicate that they feel confident they can be supportive as this will gain the child's confidence. Initially acknowledge the courage it has taken for the child to seek help and let them know you care. Explain the limits of your confidentiality and explain the reason why this information needs to be passed on to the Designated Safeguarding Lead. Give reassurance and follow any first aid guidelines if required.

All disclosures should be recorded in writing and passed to the Designated Safeguarding Lead. This written record should include:

- name of child;
- date;
- the name of the member of staff to whom the disclosure was made;
- main points from the conversation;
- signature from member of staff recording the disclosure at the end of the conversation recorded;
- agreed next steps (to be completed in consultation with the school mental health lead)

### **Confidentiality**

We should be honest with regards to the issue of confidentiality. If we think it is necessary to pass our concerns about a child on, then we should discuss with the child:

- who we are going to talk to;
- what we are going to tell them;
- why we need to tell them;

We should always share disclosures with the Designated Safeguarding Lead, this helps to safeguard our own emotional wellbeing as we are no longer solely responsible for the child; it ensures continuity of care in our absence and it provides an extra source of ideas and support. We should explain this to the child 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 child's mental health and wellbeing and children may choose to tell their parents themselves. If this is the case, the child should be given a short period of time – no longer than 24 hours to share this information before the school contacts parents. We should always give children the option of us informing parents for them or with them.

If a child gives us reason to believe that there may be underlying child protection issues, parents should not be informed, but the DSL must be informed immediately.

## **Working with Parents/carers**

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 child, 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 where possible as they will often find it hard to take much in whilst coming to terms with the news that you are sharing. Sharing sources of further support aimed specifically at parents can also be helpful too e.g. parent helplines and forums.

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/carers are aware of who to talk to, and how to get information 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/carers 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 child 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 child 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 needs help (e.g. signs of relapse).

Additionally, we will 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 children safe.

The MindEd learning portal provides free online training suitable for staff wishing to know more about a specific issue.<sup>1</sup>

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 children.

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.

Suggestions for individual, group or whole school CPD should be discussed with the Headteacher, our CPD Coordinator who can also highlight sources of relevant training and support for individuals as needed.



This policy links to:

Shropshire Safeguarding Self-Harm Pathway

Shropshire Safeguarding Child Sexual Exploitation Strategy and Assessment Toolkit

Shropshire Safeguarding threshold document

Shropshire Safeguarding schools e-safety policy guidance

SSCB website

Shropshire Early Help – Early Help Forms & Tools

<http://new.shropshire.gov.uk/earlyhelp/practitioners/>

## Appendix One

### Referral to support services

In the event of a young person displaying or disclosing concerns around self-harm the Care Pathway – Self harming risk will be followed.

In the event of a suicide concern then the Care Pathway Flowchart will be followed.

The risk to the young person will be established and parents contacted unless doing so will place the young person at further risk. (In these cases Clive CE Primary School and Nursery Safeguarding and Child Protection policy and procedures will be followed).

A self-harm initial discussion record form may be used by the Safeguarding Lead to establish the risk to the young person and then the appropriate action taken. This may include:

- \* Continue to monitor the self-harm and discuss with someone who may be able to build a relationship with the young person and provide advice,
- \* Provide the young person and parents with information and advice and continue to consider whether further assessment and support may be needed.
- \*Completion of the assessment and a webstar score, including the risk assessment to provide full details of concerns.
- \* Consulting with the school nurse, the child's GP or with a Primary Mental Health Practitioner. In addition to the risk assessment.
- \*Completion of the Early Help Targeted Referral Form.

The Designated Safeguarding Lead will discuss with the child, their parents, Head Teacher and any other agencies the agreed plans. Identify strengths, skills and risk factors and make a plan via ECINS to address any vulnerabilities. If she cannot identify the necessary agency the referral and assessment should be sent to COMPASS.

Following assessment, the identified pathway will be followed. This would be the self-harm care pathway or the suicide pathway.

If low risk, then the young person will be supported by universal services. If the assessment meets the criteria it will be submitted and support sought via a consultation with ACCESS BEE U – 0300 124 0093.

If any child protection concerns are raised the school safeguarding and child protection policy will be followed. Concerns will be documented using the record of concern for wellbeing and the time, date, what happened and any advice recorded in a timely manner.

## Appendix Two

### Helplines and websites for confidential advice and support

The new emotional health and well-being service for people aged 0-25 years is available by phoning 0300 124 0093 or emailing [025spa@sssft.nhs.uk](mailto:025spa@sssft.nhs.uk).

All young people under 18 can be referred to the service, but only new referrals for care leavers can be accepted past their 18th Birthday. The service will signpost and support young people to access other services which are available up to the age of 25 such as Kooth and the children's society. The team can also be contacted for advice for young people who are 18 and over.

For adults the Shropshire/ Telford and Wrekin Access service is 0300 124 0365. Who should call these numbers?

- Anybody who is worried about their mental health
- Anybody using South Staffordshire and Shropshire Healthcare's adult mental health services who needs to contact us out of hours
- Anybody who cares for someone receiving adult mental health services from us
- Anybody concerned about the mental health of an adult family member or close friend
- Professionals needing advice and guidance regarding mental health issues

GP or NHS direct 111

ChildLine 24hrs helpline for children and young people under 18 providing confidential counselling

0800 1111 [www.childline.org.uk](http://www.childline.org.uk)

PAPYRUS offers a helpline to give support, practical advice and information to anyone who is concerned that a young person may be suicidal

[www.papyrus-uk.org](http://www.papyrus-uk.org)

HOPELineUK 0800 068 41 41

National Self-Harm Network - support for people who self-harm, provides free information pack to service users.

[www.nshn.co.uk](http://www.nshn.co.uk)

Samaritans

Confidential emotional support for anybody who is in crisis. The Samaritans are piloting a project at KS3/4 in a number of schools which supports staff in working with young persons who self-harm/experience suicidal thoughts -

[www.samaritans.org/youremotionalhealth/workinschools](http://www.samaritans.org/youremotionalhealth/workinschools).

The site includes other ideas and support strategies. 08457 90 90 90  
[www.samaritans.org.uk](http://www.samaritans.org.uk)

Young Minds Information on a range of subjects relevant to young people.  
[www.youngminds.org.uk](http://www.youngminds.org.uk)

Young Minds Parents Information Service 0808 802 5544

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

There are many other projects out there traceable through phone directories, web searches etc.

The Site  
[www.thesite.org](http://www.thesite.org)

NSPCC  
[www.nspcc.org.uk](http://www.nspcc.org.uk)

Childnet  
[www.childnet.com](http://www.childnet.com)

[www.teenagehealthfreak.org](http://www.teenagehealthfreak.org)

[www.selfharm.org.uk](http://www.selfharm.org.uk)

EnHance - 01743 252740

Targeted Youth Support - 0345 678 9008

Lifelines - 01743 210940

Young Addiction Shropshire - 01743 294700

MIND Info Line - 0845 766 0163 / 01743 3686647