MENTAL HEALTH AND WELL-BEING POLICY FOR PUPILS

Document Status -

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Policy Created Date	7th September 2026
Current Policy Date	7th September 2026
Policy Review Frequency	Annually
Date of Next Review	September 2027
Committee/Approver of Policy	Health, Safety & Safeguarding Committee

Mental Health and Well-being Policy for pupils 2026–2027

Commitment to Review

This policy will be reviewed annually or sooner if there are changes to legislation, statutory guidance, safeguarding requirements or local procedures.

1. Policy Statement

At Hollinswood Primary School & Nursery, we are committed to promoting positive mental health and emotional wellbeing for all pupils. We believe that good mental health is fundamental to children's learning, achievement, safeguarding, relationships, physical health and overall development.

We recognise that children are more likely to thrive when they feel safe, valued, respected and listened to. We are committed to creating a nurturing, inclusive and trauma-informed environment in which every child can develop resilience, confidence and a positive sense of self.

Mental health and wellbeing are everyone's responsibility. We recognise that emotional wellbeing is closely linked to safeguarding and that mental health concerns may sometimes be indicators that a child has experienced or is at risk of abuse, neglect, exploitation or other adverse experiences. Concerns will always be considered within a safeguarding context and managed in line with our Child Protection and Safeguarding Policy.

2. Legislative and Statutory Framework

This policy has regard to:

- Keeping Children Safe in Education 2026
- Working Together to Safeguard Children 2026
- Children Act 1989 and 2004
- Education Act 2002
- Equality Act 2010
- Special Educational Needs and Disability Code of Practice
- Mental Health and Behaviour in Schools Guidance
- Early Years Foundation Stage Framework 2026
- Public Sector Equality Duty
- Telford & Wrekin Pathway to Support Guidance

This policy should be read alongside:

- Child Protection and Safeguarding Policy
- Behaviour Policy

- Attendance Policy
- SEND Policy
- Anti-Bullying Policy
- RSHE Policy
- Online Safety Policy
- Suicide Intervention Policy
- Family Help Procedures
- Child-on-Child Abuse Policy

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3. Aims

We aim to:

- Promote positive mental health and wellbeing for all pupils.
- Foster resilience, confidence and self-esteem.
- Create a culture where children feel safe to discuss worries or seek help.
- Reduce stigma associated with mental health difficulties.
- Identify needs early and provide timely support.
- Ensure pupils know where and how to access support.
- Support attendance, engagement and achievement.
- Work effectively with families and external agencies.
- Ensure staff understand the links between safeguarding and mental health.
- Promote a whole-school culture that supports emotional wellbeing.
- Support vulnerable children and those who have experienced trauma or adversity.

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4. Our School Context

We recognise the specific factors within our school community that may impact upon children's wellbeing, including:

- High levels of mobility.
- Pupils with English as an Additional Language.
- Newly arrived families.
- Financial hardship and cost-of-living pressures.
- Housing instability and homelessness.
- Family isolation and limited support networks.
- Parental mental health difficulties.
- Young carers.
- SEND and Communication and Interaction needs.
- Social, Emotional and Mental Health (SEMH) needs.
- Increased online activity and social media use.
- Persistent absence from education.

These factors may increase vulnerability to emotional and mental health difficulties and are considered when planning support and intervention.

5. Whole School Mental Health Charter

At Hollinswood Primary School & Nursery we commit to:

- Listening to children.
- Promoting kindness and inclusion.
- Challenging stigma.
- Supporting emotional wellbeing.
- Working collaboratively with families.
- Identifying concerns early.
- Keeping children safe.
- Ensuring equitable access to support.
- Promoting resilience and positive mental health.

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6. Roles and Responsibilities

Governing Body

The Governing Body will:

- Ensure effective mental health provision.
- Monitor implementation of this policy.
- Oversee wellbeing trends and outcomes.
- Ensure sufficient resources are available.
- Provide challenge and support regarding pupil wellbeing.

Headteacher

The Headteacher will:

- Promote a whole-school approach to wellbeing.
- Ensure implementation of this policy.
- Foster a positive school culture.
- Ensure staff receive appropriate training.

Senior Mental Health Lead

The Senior Mental Health Lead is:

Katherine Osborne.

Responsibilities include:

- Leading wellbeing provision across the school.
- Coordinating support and interventions.
- Supporting staff training.
- Liaising with parents and professionals.
- Monitoring impact and outcomes.
- Working closely with the DDSLs and SENDCo.
- Reviewing wellbeing data and identifying trends.

Designated Safeguarding Lead

The DSL will:

- Consider mental health concerns within a safeguarding context.
- Manage safeguarding referrals.
- Oversee safety planning.
- Coordinate multi-agency support where required.
- Ensure concerns are recorded appropriately on CPOMS.

Pastoral Lead

The school's Pastoral Lead is Sue Newbrook, who has undertaken additional mental health training through the Future in Mind programme.

Sue works closely with pupils, families and staff to provide early intervention and pastoral support for vulnerable children. Her role includes supporting:

- Pupils identified through safeguarding supervision meetings.
- Children experiencing Social, Emotional and Mental Health (SEMH) difficulties.
- Pupils presenting with high levels of anxiety.
- Children experiencing barriers to attendance.
- Vulnerable pupils requiring emotional support.
- Families accessing early help and community services.

The Pastoral Lead works closely with the Senior Mental Health Lead, DSL, SENDCo and external agencies to ensure pupils receive appropriate support at the earliest opportunity.

All Staff

All staff have a responsibility to:

- Promote emotional wellbeing.
- Build positive relationships.
- Identify concerns early.
- Record concerns promptly.
- Follow safeguarding procedures.
- Support children in accessing help.

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7. A Trauma-Informed Approach

We recognise that experiences such as:

- Abuse.
- Neglect.
- Domestic abuse.
- Bereavement.
- Parental separation.
- Exploitation.
- Homelessness.
- Poverty.
- Discrimination.
- Adverse Childhood Experiences (ACEs).

can have a significant and lasting impact on children's emotional wellbeing, behaviour, attendance, relationships and learning.

We adopt a trauma-informed approach that:

- Recognises behaviour as communication.
- Prioritises relationships.
- Promotes emotional safety.
- Seeks to understand underlying needs.
- Responds with empathy and consistency.
- Supports regulation and resilience.

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8. Promoting Positive Mental Health

Mental health is promoted through:

Curriculum

Our curriculum teaches:

- Emotional literacy.
- Healthy relationships.
- Personal safety.
- Resilience.
- Self-regulation.
- Consent and boundaries.
- Online safety.
- Healthy lifestyles.
- Managing change and loss.
- How to seek help.

These themes are delivered through:

- RSHE.
- PSHE.
- Assemblies.
- Forest School.
- Curriculum enrichment opportunities.

School Culture

We promote wellbeing through:

- Positive relationships.
- Pupil voice.
- Inclusive practice.
- Celebration of success.
- Strong pastoral support.
- Safeguarding Squad involvement.
- Community engagement activities.

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9. Pupil Voice

The views, wishes, feelings and lived experiences of pupils are central to our wellbeing approach.

We will gather pupil voice through:

- School Council.
- Safeguarding Squad.
- Wellbeing surveys.
- Pupil interviews.
- One-to-one discussions.
- Emotional wellbeing check-ins.

Pupil feedback will inform school improvement planning and wellbeing provision.

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10. Vulnerable Groups

Some children may require additional support, including:

- Children in Need.
- Children subject to Child Protection Plans.
- Children with Social Workers.
- Looked After Children.
- Previously Looked After Children.
- Children in Kinship Care.
- Young Carers.
- Children with SEND.
- Pupils with SEMH needs.
- Children affected by exploitation.
- Those experiencing domestic abuse.
- Children affected by parental mental ill health.
- Children experiencing poverty or housing instability.
- Pupils who are persistently absent.

Additional support and monitoring may be required for these pupils.

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11. Identifying Mental Health Needs

Staff should remain alert to signs that a child may be struggling emotionally.

Indicators may include:

Emotional Indicators

- Anxiety.
- Excessive worry.
- Sadness.

- Fearfulness.
- Low self-esteem.

Behavioural Indicators

- Withdrawal.
- Aggression.
- Emotional dysregulation.
- Increased conflict.
- Loss of interest.

Physical Indicators

- Sleep difficulties.
- Fatigue.
- Changes in appetite.
- Frequent physical complaints.

Educational Indicators

- Reduced concentration.
- Declining progress.
- School avoidance.
- Persistent absence.

Staff will consider whether these indicators may relate to safeguarding concerns. Where concerns regarding a pupil's emotional well-being are identified, staff should follow the school's Mental Health Concern Pathway (appendix 1). The flowchart provides clear guidance on the actions required, including discussion with safeguarding leads, recording concerns, communicating with parents, implementing support and seeking advice from external agencies where appropriate. The flowchart should be used alongside safeguarding procedures and professional judgement.

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12. Recording and Monitoring Mental Health Concerns

The school is committed to ensuring that concerns relating to pupils' mental health and emotional wellbeing are recorded promptly, accurately and consistently. Where a member of staff identifies a concern regarding a pupil's emotional wellbeing, anxiety, behaviour, presentation or mental health, this should be recorded on CPOMS in line with safeguarding procedures.

Records should:
- Be factual and objective.
- Include the child's voice where appropriate.

- Record any actions taken.
- Identify support offered.
- Include communication with parents/carers and external agencies.
- Be shared with the Designated Safeguarding Lead or Deputy Designated Safeguarding Lead as required.

Mental health and wellbeing concerns will be considered within a safeguarding context and will be reviewed regularly through safeguarding supervision meetings, pastoral discussions and multi-agency meetings where appropriate.

The Senior Mental Health Lead, DSL and pastoral team will monitor CPOMS records to identify:

- Emerging concerns.
- Repeated incidents or presentations.
- Attendance patterns linked to emotional wellbeing.
- Behavioural changes.
- Vulnerable groups requiring additional support.
- Trends across cohorts, year groups or protected groups.

This information will be used to inform early intervention, targeted support, staff training and whole-school wellbeing provision.

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13. Attendance and Emotional Wellbeing

We recognise the strong link between attendance and emotional wellbeing.

Mental health difficulties may contribute to:

- School avoidance.
- Emotionally Based School Avoidance (EBSA).
- Persistent absence.
- Severe absence.

Attendance concerns will always be considered alongside safeguarding, behaviour, SEND and wellbeing information. Early intervention will be implemented where concerns emerge.

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14. Family Help and Early Intervention

We believe that early help is essential in improving outcomes for children and families.

Where concerns arise, support may include:

- Community-based Family Help.
- Targeted Family Help.
- Family Group Decision Making.
- Team Around the Family meetings.
- Parenting support.
- Signposting to community services.

We will work alongside Family Connect and Family First Partnership professionals to ensure children receive support at the earliest opportunity.

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15. Support and Intervention

Universal Support

- Positive relationships.
- Emotional wellbeing curriculum.
- Pastoral support.
- Inclusive classroom approaches.

Targeted Support

- Emotional check-ins.
- Nurture provision.
- Young Carers support.
- Social skills groups.
- Mentoring.

Specialist Support

- School Nursing Team.
- Educational Psychology.
- CAMHS.
- Family Help Services.
- GP services.
- Specialist counselling services.

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16. Safety Planning

Where a child presents with significant mental health concerns, the school may implement an individual Safety Plan.

Safety plans may include:

- Identified triggers.
- Protective factors.
- Coping strategies.
- Trusted adults.
- Emergency contacts.
- Parent/carer involvement.
- Professional involvement.
- Review dates.

Safety plans will be reviewed regularly and adapted as needs change.

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17. Self-Harm, Suicide Risk and Overdose Concerns

Any disclosure, suspicion or evidence of:

- Self-harm.
- Suicidal ideation.
- Suicide plans.
- Suicide attempts.
- Overdose incidents.

will be treated as a safeguarding concern.

Staff must:

1. Stay calm and listen.
2. Never promise confidentiality.
3. Immediately inform the DSL.
4. Record concerns factually.
5. Follow safeguarding procedures.

Where urgent medical support is required:

- 999 will be called.
- Parents/carers will be informed where appropriate.
- Emergency medical support will be sought.

The school will follow its Suicide Intervention Policy and safeguarding procedures.

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18. Mental Health and Online Safety

We recognise the impact that technology and online experiences can have upon mental health and wellbeing.

Potential risks include:

- Cyberbullying.
- Online exploitation.
- Harmful content.
- Self-harm and suicide content.
- Misinformation.
- Social media pressures.
- AI-generated content and deepfakes.

Pupils will receive age-appropriate education to support safe and responsible online behaviour.

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19. Safeguarding and Mental Health

Mental health concerns may be indicators of:

- Abuse.
- Neglect.
- Exploitation.
- Domestic abuse.
- Family difficulties.
- Trauma.

Where concerns suggest a child may be at risk of harm:

- The DSL must be informed immediately.
- Concerns must be recorded on CPOMS.
- Safeguarding procedures will be followed.
- Referrals will be made where appropriate.

Mental health concerns will never be managed separately from safeguarding responsibilities.

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20. Working with Parents and Carers

We recognise parents and carers as vital partners.

We will:

- Communicate concerns sensitively.
- Share support strategies.
- Encourage parental involvement.
- Signpost families to services.
- Work collaboratively wherever possible.

Where parental involvement may place a child at risk, safeguarding procedures will be followed.

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21. Multi-Agency Working

We recognise that supporting mental health often requires partnership working.

We will work proactively with:

- Family Connect.
- Family Help Services.
- School Nursing.
- CAMHS.
- Educational Psychology.
- Social Care.
- Health Services.
- Early Years Services.
- Young Carers Services.

The child's lived experience will remain central to all multi-agency planning and decision making.

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22. Staff Training

Staff will receive:

- Safeguarding training.
- Mental health awareness training.
- Self-harm awareness.
- Suicide prevention awareness.
- Trauma-informed practice training.
- Online safety training.
- Updates on emerging mental health issues.

Training needs will be reviewed annually.

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23. Wellbeing Support Directory

Key sources of support may include:

Emergency

- 999
- A&E

Urgent Mental Health Support

- NHS 111 (Mental Health Option)

Professional Services

- CAMHS
- School Nursing Team
- Educational Psychology
- Family Connect
- Family Help Services

Voluntary and Charitable Support

- YoungMinds
- NSPCC
- Childline
- Telford & Wrekin Young Carers Service

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24. Monitoring and Evaluation

The effectiveness of this policy will be evaluated through:

- Pupil voice.
- Parent surveys.
- Staff feedback.
- Attendance information.
- Behaviour data.
- Safeguarding trends.
- CPOMS analysis.
- Mental health intervention outcomes.
- Safeguarding audits.
- Governor monitoring visits.

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25. Reporting to Governors

The Senior Mental Health Lead will provide governors with anonymised information regarding:

Attendance concerns.

- Intervention impact.
- Emerging risks.
- Safeguarding themes.
- Training compliance.
- Policy effectiveness.

Governors will use this information to challenge, support and monitor the effectiveness of wellbeing provision.

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26. Review

This policy will be reviewed annually or earlier if required by:

- Changes to legislation.
- Updates to KCSIE.
- Changes in local procedures.
- Safeguarding reviews.
- Emerging local or national concerns.

At Hollinswood Primary School & Nursery, we believe that positive mental health and emotional wellbeing are fundamental to safeguarding, learning and achieving the best outcomes for every child. Through a whole-school, trauma-informed and child-centred approach, we will ensure that all pupils feel safe, supported, valued and able to thrive.

Appendix 1: Mental Health Concern Pathway

This appendix contains the school's Mental Health Concern Flowchart and should be read alongside the Child Protection and Safeguarding Policy, CPOMS recording procedures and local safeguarding guidance.

A member of staff has initial concerns about a child's mental health

- Emotional well-being work led by class TA or teacher. Refer to Pupil Resources for possible activity ideas.
- Speak with parents, have they concerns? Is there something we at school should be aware of?

- Discuss concerns with Sam Jones (SENCO and Inclusion), Sue Newbrook or Abby Scott (Inclusion Leads)

- Sam Jones, Sue Newbrook or Abby Scott to discuss concerns in the Safeguarding Supervision meeting. What has been done so far? What has been the impact of this? What further intervention could be required? What other support has been accessed?
- Possible considerations;

-EWB led by Inclusion Lead, Early Help Assessment, Young Carer referral, Emotional Well-being referral to Bee-U, Boxhall Assessment, in school counselling.