

Mental Health and Wellbeing at Hemingbrough Community Primary School



Named Mental Health Lead: Sarah Chappell

Named Governor with Lead on Mental Health: Lucie Mitchell

Why Mental Health and Wellbeing is important

At Hemingbrough Community 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. The NHS follow up survey in 2020 showed that this had risen to 1 in 6 and that children and young people with a probable mental disorder were more likely to say that lockdown had made their life worse. Mental Health can have an enormous impact on quality of life, relationships and academic achievement. In many cases it is life-limiting.

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.

Keeping Children Safe in Education (2025) states:

'Schools and colleges have an important role to play in supporting the mental health and wellbeing of their pupils.'

‘Mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation. Governing bodies and proprietors should ensure they have clear systems and processes in place for identifying possible mental health problems, including routes to escalate and clear referral and accountability systems.’

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.

Underpinned by our School drivers, Community, Aspiration, Resilience and Empathy (CARE), and through Relational Approaches and THRIVE our aim is to help develop the protective factors which build resilience to mental health problems and to be a school where:

- All children are valued.
- Children have a sense of belonging and feel safe.
- Children feel able to talk openly with trusted adults about their problems without feeling any stigma.
- Positive mental health is promoted and valued.
- Bullying is not tolerated.

In addition to children’s wellbeing, we recognise the importance of promoting staff mental health and wellbeing.

Purpose of this policy

This policy sets out:

- How we promote positive mental health.
- How we prevent mental health problems.
- How we identify and support children with mental health needs.
- How we train and support all staff to understand mental health issues and spot early warning signs to help prevent or address mental health problems
- Key information about some common mental health problems.
- Where parents, staff and children can get further advice and support.

Definition of mental health and wellbeing

We use the World Health Organisation’s definition of mental health and wellbeing:

“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”.

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.

Links to other policies

This policy links to our policies on Safeguarding, Medical Needs, Anti-Bullying, SEND, Equalities, Behaviour, PSHE and RSE.

Links with the School's Behaviour Policy are especially important because behaviour, whether it is disruptive, withdrawn, anxious, depressed or otherwise, **may** be related to an unmet mental health need.

A whole school approach to promoting positive mental health

We take a whole school approach to promoting positive mental health that aims to help children become more resilient, happy and successful and to prevent problems before they arise.

This encompasses seven aspects:

1. Creating an ethos, policies and behaviours that support mental health and resilience, and which everyone understands.
2. Helping children to develop social relationships, support each other and seek help when they need it.
3. Helping children to be resilient learners.
4. Teaching children social and emotional skills and an awareness of mental health.
5. Early identification of children who have mental health needs and planning support to meet their needs, including working with specialist services.

6. Effectively working with parents and carers.

7. Supporting and training staff to develop their skills and their own resilience.

We also recognise the role that stigma can play in preventing understanding and awareness of mental health issues. We therefore aim to create an open and positive culture that encourages discussion and understanding of these issues.

Staff roles and responsibilities, including those with specific responsibility

All staff have a responsibility to promote positive mental health, and to understand about protective and risk factors for mental health. Some children will require additional help and all staff should have the skills to look out for any early warning signs of mental health problems and ensure that children with mental health needs get early intervention and the support they need.

All staff understand about possible risk factors that might make some children more likely to experience problems, such as: where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, physical long-term illness, having a parent who has a mental health problem, death and loss, including loss of friendships, family breakdown, and bullying. They should also understand the factors that protect children from adversity, such as self-esteem, communication and problem-solving skills, a sense of worth and belonging and emotional literacy (see appendix 1 on risk and protective factors).

Our Mental Health Lead:

- Leads and works with other staff to coordinate whole school activities to promote positive mental health and wellbeing.
- Provides advice and support to staff and organises training and updates.
- Is the first point of contact with mental health services, and makes individual referrals to them
- Keeps up to date with information about what support is available
- Liaises with the PSHE leader on teaching about mental health

We recognise that many behaviours and emotional difficulties can be supported within the School environment, or with advice from external professionals. Some children will need more intensive support at times, and there are a range of mental health professionals and organisations that provide support to children with mental health needs and their families.

Supporting children's positive mental health

The School has a key role in promoting children's positive mental health and helping to prevent mental health difficulties. Our School uses a range of strategies and approaches including, but not exhaustive:

- Mental Health and wellbeing Action Plan
- Use of Thrive Approach
- Use of the Relational Approach
- Morning 'check-ins'/circle times
- Calming moments timetabled into the day (mindfulness, meditation, breathing exercises)
- Calming areas
- Emotional Freedom Tapping
- Use of range of resources such as calming boxes, fiddle toys, sand pictures
- Worry and Sunshine boxes
- Teaching about mental health and wellbeing through our Jigsaw PSHE scheme
- Transition programmes for supporting transition within school, to school and from school
- Use of Metacognition
- Nurture groups and activities
- Group interventions to develop communication and social skills
- Outdoor learning opportunities
- Staff wellbeing plan

Through PSHE we teach the knowledge and social and emotional skills that will help children to be more resilient, understand about mental health and be less affected by the stigma of mental health problems.

In EYFS, KS1 and KS2 children explore and learn about mental health and wellbeing through the Jigsaw topics:

- Being Me in My World
- Celebrating Difference (including anti-bullying)
- Dreams and Goals
- Healthy Me
- Relationships
- Changing Me (including Sex Education)

Identifying, referring and supporting children with mental health needs

Our approach is to:

- Provide a safe environment to enable children to express themselves and be listened to.

- Ensure the welfare and safety of children are paramount.
- Identify appropriate support for children based on their needs.
- Involve parents and carers when their child needs support.
- Involve children in the care and support they have.
- Monitor, review and evaluate the support with children and keep parents and carers updated.

Early Identification

Our identification system involves a range of processes. We aim to identify children with mental health needs as early as possible to prevent things getting worse. We do this in different ways including:

- Analysing behaviour, exclusions, incidents of illness, attendance and sanctions.
- Monitoring attainment and progress across the curriculum.
- Staff report concerns about individual children to the relevant lead persons/identify children that may need support.
- Checking Worry and Sunshine boxes in each class where children can raise concerns as well as positive moments (these may anonymous but give an indication of needs in a particular class regularly).
- Thrive assessment
- 'Three Houses'
- Being 'Attachment aware'
- Following 'Relational Approaches'
- Regular meetings for staff to raise concerns.
- Gathering information from a previous school at transfer.
- Enabling and supporting children to raise concerns to any member of staff.
- Enabling and supporting parents and carers to raise concerns to any member of staff.

Staff at Hemingbrough CP School understand the protective and risk factors (see Appendix 1), types of mental health needs (see Appendix 2) and signs that might mean a pupil is experiencing mental health problems. Any member of staff concerned about a pupil will take this seriously and talk to the Mental Health Lead or the SENDCO.

These signs might include:

- Isolation from friends and family and becoming socially withdrawn.
- Non verbal behaviour
- Changes in patterns of behaviour
- Changes in activity or mood or eating/sleeping habits.
- Lowering academic achievement.

- Talking or joking about self-harm or suicide.
- Expressing feelings of failure, uselessness or loss of hope.
- Secretive behaviour.
- An increase in lateness or absenteeism.
- Not wanting to do PE or get changed for PE.
- Wearing long sleeves in hot weather.
- Drugs or alcohol misuse.
- Physical signs of harm that are repeated or appear non-accidental.
- Repeated physical pain or nausea with no evident cause.

Staff are aware that mental health needs, such as anxiety, might appear as non compliant, disruptive or aggressive behaviour which could include problems with attention or hyperactivity. This may be related to difficulties at home, difficulties with learning, peer relationships or development.

If there is a concern that a child is in danger of immediate harm then the School's child protection procedures are followed. If there is a medical emergency then the School's procedures for medical emergencies are followed.

Disclosures by children and confidentiality

We recognise how important it is that staff are calm, supportive and non-judgemental to children who disclose a concern about themselves or a friend. The emotional and physical safety of our children is paramount and staff listen rather than advise. Staff make it clear to children that the concern will be shared with the Mental Health Lead or the Designated Safeguarding Lead and recorded, in order to provide appropriate support to the child.

Disclosures are recorded and maintained on CPOMS, including date, name of child and member of staff to whom they disclosed, summary of the disclosure and next steps/actions taken.

Assessment, Interventions and Support

All concerns are reported to the Mental Health Lead and recorded. We then implement our assessment system, which is based on levels of need to ensure that children get the support they need, either from within the School or from an external specialist service. Our aim is to put in place interventions as early as possible to prevent problems escalating.

We recognise that like physical health, mental health and wellbeing can vary at any given time, it can be fluid and change in response to a host of personal or environmental factors.

<p>Need</p> <p>The level of need is based on regular discussions with key members of staff and involves parents and children.</p>	<p>Evidence-based Intervention and Support</p> <p>The kinds of intervention and support provided will be decided in consultation with key members of staff, parents and children</p> <p>For example:</p>	<p>Monitoring</p>
<p>Highest need</p>	<p>Referral to the Local Authority Hub/Inclusion Locality panel for advice and support</p> <p>Educational Psychologist</p> <p>Referral to CAMHS for assessment</p> <p>Referral to other external agencies as required</p> <p>In school Interventions/support (this list is not exhaustive) such as Thrive, use of Relational approaches and restorative practices, Draw and Talk</p> <p>Bubble Room/Calm spaces</p> <p>If the school, professionals and/or parents conclude that a statutory education, health and care assessment is required, we refer to the SEND policy.</p>	<p>Children needing targeted individualised support will have a Support Plan drawn up setting out</p> <ul style="list-style-type: none"> • The needs of the children • How the pupil will be supported • Actions to provide that support <p>Children (where appropriate) and parents/carers will be involved in the plan. The plan and interventions are monitored, reviewed and evaluated to assess the impact e.g. through pre and post Thrive assessment and if needed a different kind of support can be provided.</p> <p>The Support Plan is overseen by the Mental Health Lead and SENCo.</p>
<p>Some need</p>	<p>Educational Psychologist</p> <p>Nurture Activities</p> <p>Thrive group</p> <p>Bubble Room</p> <p>Calm spaces</p> <p>In school interventions such as Lego therapy.</p> <p>Use of Relational approaches and restorative practices</p> <p>Classroom activities (eg in PSHE)</p>	<p>As above</p>

Low need	General classroom support and classroom activities Bubble Room Calm Spaces	Use of general Thrive assessment and /or REST

Support for friends

We recognise that when a pupil is experiencing mental health problems it can be challenging for their friends, who often want to help them but are not sure the best thing to do and can also be emotionally affected. In the case of eating disorders and self-harm, it is possible that friends may learn unhealthy coping strategies from each other, and we will consider on a case by case basis what support might be appropriate including one to one and group support.

We will involve the pupil who is suffering and their parents and consider what is helpful for friends to know and what they should not be told, how they can best support, things they should avoid doing/saying which may inadvertently cause upset and warning signs that their friend needs help.

We will also make information available about where and how to access information and support for themselves and healthy ways of coping with the difficult emotions they may be feeling.

Working with specialist services to get swift access to the right specialist support and treatment

In some case a children's mental health needs require support from a specialist service such as CAMHS, Early Help or an Educational Psychologist. These might include anxiety, depression, self-harm and eating disorders.

We have access to a range of specialist services and during the support where possible will have regular contact with the service to review the support and consider next steps, as part of the monitoring process.

School referrals to a specialist service will be made by the Mental Health Lead or SENDCO following the assessment process and in consultation with the child and his/her parents and carers. Referrals will only go ahead with the consent of the parent/carers and when it is the most appropriate support for the pupil's specific needs.

Involving parents and carers

We recognise the important role parents and carers have in promoting and supporting the mental health and wellbeing of their children, and in particular supporting children who do have mental health needs.

To support parents and carers:

- We provide information on our website about what is taught in PSHE.
- We provide tips and links to further information on our website to promote mindfulness and wellbeing
- We are aware that parents and carers react in different ways to knowing their child has a mental health difficulty and we will be sensitive and supportive. We also aim to reassure by explaining that mental health problems are common, that the school has experience of working with similar issues and that help and advice are available.
- We make every effort to support parents and carers to access services where appropriate. Our primary concern is the children, and in the rare event that parents and carers are not accessing services we will seek advice from the Local Authority. We also provide information for parents and carers to access support for their own mental health needs.

Appendix 1

Protective and Risk factors (adapted from Mental Health and Behaviour DfE November 2018)

	Risk Factors	Protective Factors
In the Child	<ul style="list-style-type: none">• Genetic influences• SEND• Specific development delay• Communication difficulties• Difficult temperament• Physical illness• Academic failure• Low self-esteem	<ul style="list-style-type: none">• Secure attachment experience• Outgoing temperament as an infant• Good communication skills, sociability• Being a planner and having a belief in control<ul style="list-style-type: none">• Having problem solving skills• Having a positive attitude• Humour• A positive attitude• Experiences of success and achievement• Faith or spirituality• Capacity to reflect

In the Family	<ul style="list-style-type: none"> • Overt parental conflict including domestic violence • Family breakdown (including where children are taken into care or adopted) • Inconsistent or unclear discipline • Hostile and rejecting relationships • Failure to adapt to a child's changing needs • Physical, sexual, emotional abuse, or neglect • Parental psychiatric illness • Parental criminality, alcoholism or personality disorder • Death and loss – including loss of friendship 	<ul style="list-style-type: none"> • At least one good parent-child relationship (or one supportive adult) • Affection • Clear, consistent discipline • Support for education • Supportive long term relationship or the absence of severe discord
In the School	<ul style="list-style-type: none"> • Bullying including online (cyber) • Discrimination • Breakdown in or lack of positive friendships • Deviant peer influences • Peer pressure • Peer on peer abuse • Poor pupil to teacher/school staff relationships 	<ul style="list-style-type: none"> • Clear policies on behaviour and bullying • Staff behaviour policy (also known as code of conduct) • Culture of openness and trust for children to raise problems • A whole-school approach to promoting good mental health • Good pupil to teacher/school staff relationships • Positive classroom management • A sense of belonging • Positive peer influences • Positive friendships • Effective safeguarding and Child Protection policies. • An effective early help process • Understand their role in and be part of effective multi-agency working • Appropriate procedures to ensure staff are confident to can raise concerns about policies and processes, and know they will be dealt with fairly and effectively
In the Community	<ul style="list-style-type: none"> • Socio-economic disadvantage • Homelessness • Disaster, accidents, war or other overwhelming events • Discrimination • Exploitation, including by criminal gangs and organised crime groups, trafficking, online abuse, sexual exploitation and the influences of extremism leading to radicalisation • Other significant life events 	<ul style="list-style-type: none"> • Wider supportive network • Good housing • High standard of living • High morale school with positive policies for behaviour, attitudes and anti-bullying • Opportunities for valued social roles • Range of sport/leisure activities

