

Pupil mental health and wellbeing policy

Maun Infant and Nursery School



Maun
INFANT & NURSERY

Approved by: **Kerry Norman**

Last reviewed on: **1.2.26**

Next review due by: **February 2027**

1. Aims

At Maun Infant and Nursery 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

It 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. Promoting Positive Mental Health for all children

The Forge Trust is committed to ensuring that our academies are safe emotional spaces that support the mental health of all our children. As a Trust, we recognise that creating and maintaining safe emotional spaces will, at times, be complex and require a delicate balance between the needs of different pupils. However, to support staff we have identified core expectations that need to be in place as a pre-requisite.

Core Expectations:

- **Warm positive relationships**

What this looks like in a Forge Academy

Teachers and support staff use open body language, calm voices and consistent interactions. They follow the behaviour policy and individual behaviour plans consistently.

Staff look for what is going right first and give positive feedback. Staff listen to pupils and value responses, making the school a safe space to contribute without fear of ridicule or derision. Staff are aware that many pupils are likely to have suffered Adverse Childhood Experiences, and that thoughtless communications can reinforce earlier hurt.

Staff are aware that all interactions including those that involve responding to undesirable or challenging behaviour are opportunities to build trust and strengthen relationships. Staff are aware of the need to de-escalate situations and to have an open mind about what has happened, asking questions such as “What happened (to you)? rather than “What have you done?” Staff seek to refocus and restore relationships as soon as they are able after an incident.

Staff authentically recognise effort and achievement, success and difficulties or provide a sense of being heard and understood to the pupils they interact with. Staff carry these behaviours onto the corridors and into shared areas, recognising their responsibility for the school culture and promoting positive behaviour.

Staff seek to reduce the stakes of behavioural conversations by avoiding an audience of peers where possible. Staff may project their voice appropriately and performatively when managing groups or when an intervention is needed to ensure a space remains safe for all, but this is done without naming and shaming or singling out. Staff support each other in providing breathing space for one another when required.

What we do not want to see (or hear) in a Forge Academy:

- Shouting
- Sarcasm/ humour at the child's expense (it's not just banter)
- Eye-rolling/ tutting, head-shaking
- Aggressive body language (finger pointing, towering-over, intimidating proximity)
- Labelling of a child or family sometimes accompanied by group thinking (“Well what do you expect mentality”)
- Staff room conversations that contribute to the above
- Talking critically about a child to another adult or recounting a behaviour incident to another adult in front of the child
- Belittling a child
- Singling a child out for a performative telling off in front of peers
- Condemning language (avoid always/never)
- Insincere/inauthentic praise

As a guide, give positive, specific feedback for an action or process not a disposition e.g. following a rule, an act of kindness, meeting a target, concentrating or working hard, persevering over time or carefully. This sort of feedback shows the child that you have noticed what they are doing and paid attention. Avoid superficial comments such as “You are a star!” or “You are so clever”. Research shows that those who receive comments like this can become dependent on approval and risk averse not wanting to lose their special status while those around them can feel that these characteristics are innate and just not them.

➤ **Predictable routines**

What this looks like in a Forge Academy

Visual timetables are displayed and followed. Transition times are carefully planned and routinised with clear communication and signposting (cues may be non-verbal and include a fun element e.g. a favourite piece of music for tidying). Thought is given to SEND children at these times and support strategies are in place where needed.

Timetable disruptions are kept to a minimum and where they are unavoidable are communicated at an early stage.

Major transitions such as changing classes or key stages are well planned with extensive transition work undertaken.

The Forge Trust recognises that less structured times and events may be a particular challenge for pupils who are neurodiverse, have suffered Adverse Childhood Experiences or who have a sensory or social and

emotional need. For this reason, theme days, non-uniform, fund raising days are kept to a minimum (this also supports families that face financial difficulties) and timetables remain in place with thorough planning all the way up to major holidays. Consideration is also given to re-establishing settled routines as soon as possible after holidays and avoiding out of the ordinary activities on the first few days back unless unavoidable.

➤ **Calm environment**

What this looks like in a Forge Academy

Forge schools, classrooms and shared areas are characterised by tidiness and order (no clutter). Thought is given to lighting and display to avoid overstimulation; auditory overstimulation is also reduced where possible and avoided. Teachers use visual cues and routines to reduce the number of verbal interventions they need to make (this increases the impact of when they do need to address the whole class).

➤ **We all belong**

What this looks like in a Forge Academy

Academies and classes have a clear identity and unite around positive values. Cooperation is valued and the things we have in common regularly recognised e.g. the need to be listened to, valued and to be treated with kindness. The different strengths of children are valued and celebrated. Kindness and helping each other are consistent messages.

➤ **Collegiate Responsibility**

What this looks like in a Forge Academy

Trustees and Leaders in the Trust recognise their responsibility in creating a positive professional development culture in which staff are valued and supported to meet the challenges they face. All staff recognise that the maintenance of safe emotional spaces is an ongoing process not a destination. Staff support each other and in-turn recognise when they may need support. Clear communications routes are available at academy and trust level, and staff are encouraged to be open about challenges they may face in a no-blame culture.

All staff are guardians of the culture and understand the need that to raise any concerns they may have regarding colleagues who are breaching the principles of safe emotional spaces (see low level concerns policy).

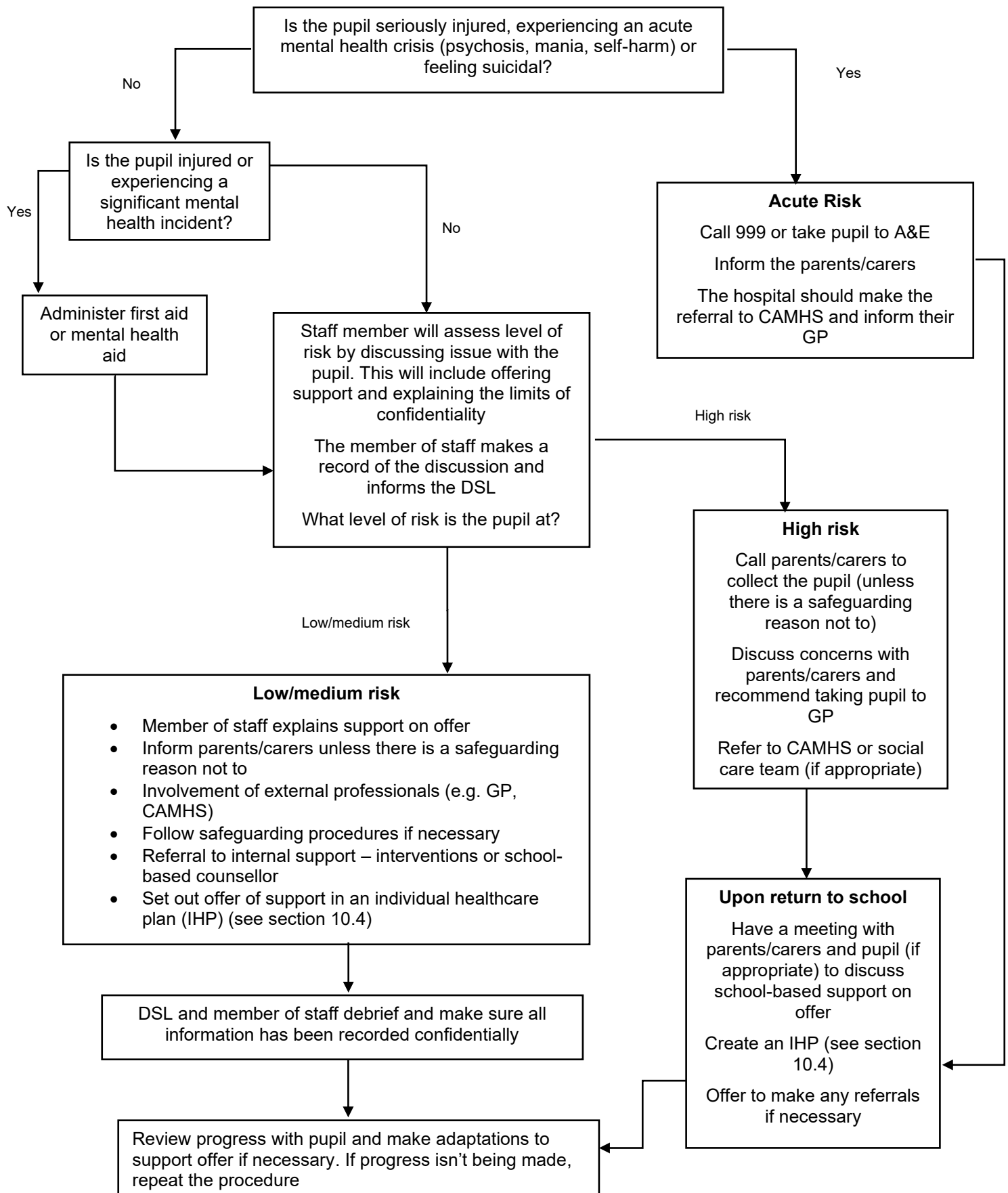
4. Roles and responsibilities

All staff are responsible for promoting positive mental health and wellbeing across our school and for understanding risk factors. If any members of staff are concerned about a pupil's mental health or wellbeing, they should inform Kerry Norman (DSL and Mental Health lead).

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

- Principal
- Designated safeguarding lead (DSL)
- Special educational needs co-ordinator (SENCO)
- Mental health lead
- Attendance lead

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



2. 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

7. 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 and stored in the pupil's confidential child protection file.

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

8. 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 safeguarding policy will be followed.

8.1 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 and share the information with the chosen elected member of staff
6. The DSL/mental health lead will inform the parent/carer (if appropriate)
7. Any other relevant members of staff or external professionals will be informed on a need-to-know basis

9. Supporting pupils

9.1 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 assemblies, PSHRE and mental health awareness week
- Collaborating with the Mental Health Support Team (MHST) who provide workshops to support pupils to understand and name their emotions, understand and manage their worries and support them through transition
- Signposting all pupils to sources of age-appropriate support both on and offline
- Having open discussions about mental health during lessons
- Monitoring pupils' mental health through assessments, e.g. a strengths and difficulties questionnaire/ Motional
- Appointing a senior mental health lead with a strategic oversight of our whole school approach to mental health and wellbeing
- Offering pastoral support within cohort teams and also through the targeted support of our Child and Family Support Worker
- Making classrooms a safe space to discuss mental health and wellbeing through interventions such as:
 - Circle time
 - Zones of Regulation
 - Forest School
 - Take 5 Breathing
 - The Five Ways to Wellbeing

9.2 Assessing what further support is needed

If a pupil is identified as having a mental health need, the 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

9.3 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:

- ELSA
- Therapy sessions i.e. play or lego therapy
- Draw for Talk
- Time to Talk
- Bespoke intervention based around individual needs and underpinned by trauma-informed approaches

- Reduced timetable
- 1:1 or small group check-ins

9.4 Individual healthcare plans (IHPs)

A pupil will be offered an individual healthcare plan (IHP) where there has been an acute mental health crisis (see flowchart above) or there are concerns that a mental health crisis may occur, and there is not already a plan in place to support the SEMH needs of the pupil i.e. behaviour plan, ILP, EHCP.

IHPs are written in collaboration with the pupil (if appropriate), their parent/carer and any other relevant professionals.

The pupil's IHP will contain the following details:

- 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

9.5 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
- CAMHS
- Mental health charities (e.g. [Samaritans](#), [Mind](#), [Young Minds](#), [Kooth](#))
- Local counselling services

10. 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
- 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
- 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 PSHRE, and share ideas for extending and exploring this learning at home

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 confidential record.

If appropriate, an individual healthcare plan (IHP) will be created in collaboration with parents/carers (see section 10.4).

11. 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

12. 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.

A DSL will be available to provide further information to pupils and parents/carers if they want to learn more about what support is available.

Details of sources of mental health support will be provided via the school website and Class Dojo.

13. Whole school approach to promoting mental health awareness

13.1 Mental health is taught in PSHRE

We follow the [PSHE Association Guidance to teaching mental health and emotional wellbeing](#).

Pupils are taught to:

- Develop healthy coping strategies
- Challenge misconceptions around mental health
- Understand their own emotional state
- Keep themselves safe

For more information, see our PSHRE curriculum.

13.2 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
- Organising workshops run by the MHST (Mental Health Support Team)

14. 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

15. 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:

- 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 through our staff absence insurance scheme

16. Monitoring arrangements

This policy will be reviewed by K. Norman (Headteacher), every two years. At every review, the policy will be approved by the Board of Trustees.

Template A: individual healthcare plan



Name of school/setting

Child's name

Group/class/form

Date of birth

Child's address

Medical diagnosis or condition

Date

Review date

Family Contact Information

Name

Phone no. (work)

(home)

(mobile)

Name

Relationship to child

Phone no. (work)

(home)

(mobile)

Clinic/Hospital Contact

Name

Phone no.

G.P.

Name

Phone no.

Who is responsible for providing support in school

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Describe medical needs and give details of child's symptoms, triggers, signs, treatments, facilities, equipment or devices, environmental issues etc

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Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision

Daily care requirements

Specific support for the pupil's educational, social and emotional needs

Arrangements for school visits/trips etc

Other information

Describe what constitutes an emergency, and the action to take if this occurs

Who is responsible in an emergency (*state if different for off-site activities*)

Plan developed with

Staff training needed/undertaken – who, what, when

Form copied to