

MENTAL HEALTH POLICY

Date of Issue	Spring 26
Review Date	Spring 28
Ratified by	Policy Committee
Produced by	School
SLT Responsible	Assistant Headteacher, Inclusion
Signature of Chair	
Signature of Headteacher	

Table of Contents

1. Policy Statement
2. Scope
3. Aims
4. Key Principles
5. Legal and Statutory Context
6. Roles and Responsibilities
 - 6.1 Designated Leads and Key Roles
 - 6.2 The Mental Health Lead
 - 6.3 Staff Responsibilities
7. Whole-School Promotion of Mental Health and Wellbeing
 - 7.1 School Culture and Environment
 - 7.2 Curriculum: PSHE / RSHE and Wider Learning
 - 7.3 Signposting
 - 7.4 Targeted and Specialist Support
8. Identification, Assessment and Graduated Response
 - 8.1 How Concerns are Identified
 - 8.2 Early Help and Graduated Response Pathway
 - 8.3 Individual Support Plans
9. Recognising Warning Signs and Risk/Protective Factors
 - 9.1 Possible Warning Signs
 - 9.2 Risk and Protective Factors
10. Responding to Disclosures and Concerns
 - 10.1 Having Supportive Conversations
 - 10.2 Recording and Information Sharing
 - 10.3 Confidentiality
11. Self-Harm, Suicidal Ideation and Crisis Response
 - 11.1 Immediate Risk
 - 11.2 Safety Planning and Follow-Up
 - 11.3 Postvention (After a Serious Incident)
12. Working with Parents/Carers
13. Working with External Agencies
14. Staff Wellbeing
15. Training and Staff Development
16. Monitoring, Evaluation and Review
17. Linked Policies and Documents

Appendices

- Appendix 1: Quick Reference – What to Do if You Are Worried About a Pupil
- Appendix 2: Supporting Conversation Prompts
- Appendix 3: Signposting (National)
- Appendix 4: References (National Guidance)

Policy statement

Mental health is a state of wellbeing in which every individual realises their potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community (World Health Organization).

Fearnhill School is committed to promoting positive mental health and wellbeing for all pupils and staff. We do this through a combination of universal whole-school approaches and targeted support for individuals and groups who may be vulnerable. We also recognise that some pupils and staff will experience periods of mental ill health, and we will respond with timely, compassionate and proportionate support.

Scope

This policy applies to all pupils, staff (teaching and non-teaching), volunteers and governors. It should be read alongside related policies, particularly Safeguarding and Child Protection, Behaviour, Attendance, SEND, Supporting Pupils with Medical Conditions, Relationships Education / RSE and Health Education, Anti-bullying, Equality and Online Safety.

Aims

- Promote positive mental health and wellbeing for all pupils and staff.
- Create a whole-school culture that supports belonging, safety, respectful relationships and help-seeking.
- Increase understanding of common mental health issues and reduce stigma.
- Support staff to identify early warning signs of mental ill health and respond appropriately.
- Provide clear pathways for support, including early help and referrals to specialist services when needed.
- Work in partnership with parents/carers and external agencies to meet pupils' needs.
- Ensure safeguarding procedures are followed where there is risk of harm.

Key principles

- Safeguarding first: mental health concerns may be a safeguarding concern and will be managed in line with our Safeguarding and Child Protection Policy.
- Early identification and graduated response: support is put in place promptly and reviewed regularly.
- Pupil voice and dignity: pupils are listened to and involved in decisions wherever possible.

- Inclusion and reasonable adjustments: support is responsive to SEND, neurodiversity, trauma, culture and protected characteristics.
- Confidentiality with clarity: information is shared on a need-to-know basis, and pupils understand when confidentiality cannot be maintained.
- Partnership: we work collaboratively with parents/carers and external services.

Legal and statutory context

This policy is informed by (non-exhaustive):

- Keeping Children Safe in Education (statutory guidance, most recent version).
- Working Together to Safeguard Children (statutory guidance).
- Mental health and behaviour in schools (DfE advice).
- Relationships Education, Relationships and Sex Education (RSE) and Health Education (statutory guidance).
- Equality Act 2010 and the duty to make reasonable adjustments.
- Children and Families Act 2014 and the SEND Code of Practice (0 to 25).
- Data Protection Act 2018 and UK GDPR.

Roles and responsibilities

Everyone has a role in promoting and protecting mental health and wellbeing.

Designated leads and key roles

- Designated Safeguarding Lead (DSL): Michael Phillips.
- Mental Health Lead: Cate Brown.
- Deputy Mental Health Lead: Michael Phillips.
- Mental Health Governor: Mary Penny.
- Lead First Aider: Alison Charalambides.
- Bereavement Lead: Cate Brown.
- CPD Lead: Tim Spencer.

Up-to-date details of safeguarding roles are published to staff and on the school website.

Any staff member concerned about a pupil's mental health or wellbeing should speak to the Mental Health Lead/Deputy in the first instance, unless there is an immediate safeguarding risk, in which case the DSL should be contacted immediately.

The Mental Health Lead

The Mental Health Lead coordinates Fearnhill's whole-school approach, including:

- Overseeing the school's approach to mental health and wellbeing, including how this is reflected in the curriculum, behaviour, attendance and pastoral support.
- Supporting identification of pupils at risk of, or showing signs of, mental ill health.

- Coordinating in-school interventions and reviewing impact.
- Maintaining links with local services (for example NHS, early help, counselling providers) and supporting referrals when appropriate.
- Supporting and advising staff working with pupils experiencing mental ill health and promoting staff confidence through training and guidance.
- Leading/maintaining staff development, resources and signposting for pupils and families.

Staff responsibilities

All staff will:

- Model healthy relationships and supportive communication.
- Maintain a curious, non-judgemental stance and respond calmly to disclosures.
- Follow safeguarding procedures and report concerns promptly.
- Record concerns and actions on CPOMS in line with school procedures.
- Attend relevant training and seek advice when unsure.

Whole-school promotion of mental health and wellbeing

School culture and environment

- A clear culture of belonging, safety, respect and inclusion.
- Consistent behaviour routines that are predictable, fair and restorative where appropriate.
- Anti-bullying and online safety work to reduce harm and support peer relationships.
- Pupil voice and participation through student council, surveys and targeted consultation.

Curriculum: PSHE / RSHE and wider learning

Pupils learn the knowledge and skills needed to keep themselves and others physically and mentally healthy and safe through PSHE/RSHE, tutor time and assemblies. Content is adapted to the needs of each cohort and taught safely and sensitively. This includes: emotional literacy, coping strategies, help-seeking, healthy relationships, online safety, sleep, substance education and resilience.

Signposting

We will ensure that staff, students and parents are aware of sources of support within school and in the local community. This should include what support is available within our school and local community, who it is aimed at and how to access it.

We will display relevant sources of support in communal areas and toilets and will regularly highlight sources of support to students within relevant parts of the curriculum. Whenever we highlight sources of support, we hope to increase the chances of students seeking support by understanding:

- What help is available
- Who it is aimed at

- How to access it
- Why to access it
- What is likely to happen next

Targeted and specialist support

Where pupils need additional support, we use a graduated response. This may include mentoring, counselling, small-group interventions, reasonable adjustments in lessons, behaviour support plans, attendance support and referrals to external services.

Identification, assessment and graduated response

How concerns are identified

Concerns may be identified through:

- Staff observations, tutor/lesson interactions and pastoral contacts.
- Pupil self-referral or peer concerns.
- Attendance, behaviour and achievement data (including patterns over time).
- Parent/carers contact and information from external professionals.
- Safeguarding information and multi-agency discussions.

Early help and graduated response pathway

When a concern is raised, staff should not delay putting support in place. The Mental Health Lead/Deputy will coordinate a proportionate response. Actions may include: an initial conversation with the pupil, contacting parents/carers (unless doing so increases risk), a short-term support plan, and review dates to evaluate impact.

Individual support plans

For pupils with ongoing needs, an individual support plan (sometimes called an individual care plan or safety plan) may be used. Plans will be co-produced with the pupil (and parents/carers where appropriate) and may include: triggers, preferred strategies, reasonable adjustments, support adults, and clear steps to take in a crisis.

Recognising warning signs and risk/protective factors

Possible warning signs:

- Changes in mood, behaviour or peer relationships; increased isolation.
- Changes in eating or sleeping patterns; unexplained tiredness.
- Decline in attainment or engagement; increased lateness/absence.
- Physical signs of self-harm or frequent unexplained injuries.
- Talking or joking about self-harm or suicide; expressing hopelessness.
- Substance misuse or risk-taking behaviour.
- Somatic complaints (headaches, stomach aches) without clear cause.

Risk and protective factors (summary)

To promote positive mental health, it is important that schools understand protective factors that can enable students to be resilient when they encounter problems and challenges. The role that school plays in promoting the resilience of their students is particularly important for children with less supportive home lives, who may not have a trusted adult they can talk to. Schools should be a safe and affirming place for children where they can develop a sense of belonging and feel able to trust and talk openly with adults about their problems.

Examples (not exhaustive) - interpret in context:

Context	Risk factors (examples)	Protective factors (examples)
In the child	Learning/communication needs; low self-esteem; long-term illness; unmet neurodiversity needs; repeated failure.	Strengths/interests; success experiences; supportive adult; emotional literacy; coping skills.
In the family	Conflict/instability; parental mental ill health; neglect/abuse; bereavement/loss; unclear boundaries.	At least one supportive relationship; routines; warmth/affection; stable care; support for education.
In school	Bullying/discrimination; peer conflict; inconsistent routines; attendance barriers; feeling unsafe.	Clear policies; consistent routines; positive relationships; reasonable adjustments; belonging; safeguarding.
In the community	Poverty/housing instability; discrimination; exploitation risks; limited access to activities.	Wider support network; access to activities; community belonging; accessible services.

Responding to disclosures and concerns

Having supportive conversations

Any pupil may speak to any staff member. Staff should respond calmly, listen without judgement, and focus first on safety. Staff should not promise absolute confidentiality. Staff should avoid making assumptions, minimising feelings, or asking leading questions.

Recording and information sharing

All concerns and actions must be recorded on CPOMS as soon as possible on the same day. Records should include date/time, factual information, the pupil's words as accurately as possible, and agreed next steps. The Mental Health Lead/Deputy and/or DSL must be informed in line with the level of risk.

Confidentiality

Information is shared on a need-to-know basis to safeguard pupils and support effective help. Pupils should be told what will be shared, with whom and why. Parents/carers will normally be informed if a pupil is at risk of harm or needs support, unless doing so increases risk (for example, where there are safeguarding concerns).

Self-harm, suicidal ideation and crisis response

Immediate risk

If a pupil is at immediate risk of harm to self or others, staff must: stay with the pupil (do not leave them alone), contact the DSL and Mental Health Lead/Deputy immediately, and follow emergency procedures. If needed, call 999 or request urgent support via NHS 111 and/or attend A&E.

Safety planning and follow-up

Where a pupil is not at immediate risk but presents with suicidal thoughts or self-harm, the Mental Health Lead/Deputy will coordinate a safety plan, including coping strategies, trusted adults, supervision arrangements, and clear steps for escalation. A review meeting with parents/carers will normally be arranged.

Postvention (after a serious incident)

Following a serious incident, the school will follow safeguarding advice and work with external agencies to provide support for the pupil, peers and staff. Communication will be carefully managed to reduce risk of contagion and to support bereaved or affected individuals.

Working with parents/carers

We recognise parents/carers as key partners. Where appropriate, we will involve them early, share concerns sensitively, and agree next steps. We will provide signposting to evidence-based support and will offer follow-up contact to review progress.

Working with external agencies

Fearnhill School works with a range of services including early help, school nursing, counselling, educational psychology, social care and CAMHS. The Mental Health Lead/Deputy supports referrals and ensures that the school can evidence the support already offered and its impact. We will seek consent where appropriate and share information proportionately.

Staff wellbeing

Staff wellbeing is essential to a healthy school. Fearnhill School supports staff through an open-door culture to line managers and SLT, briefing/debriefing, appropriate supervision where staff work with high-need pupils, access to CPD, and signposting to external support (for example, employee assistance).

- Tea/coffee and wellbeing gestures provided termly by SLT.
- Herts rewards scheme (where applicable).
- Social events and opportunities to connect.

- Supportive performance development and access to training when needed.

Training and staff development

All staff receive safeguarding training and updates, including how to recognise and respond to mental health concerns. We also use additional training to build confidence and consistency (for example, suicide awareness, trauma-informed practice, attachment and anxiety). The school will maintain a record of training and identify further needs through monitoring and supervision.

Monitoring, evaluation and review

The Mental Health Lead reports, as appropriate, to SLT and governors on the effectiveness of the school's approach (for example trends in concerns, uptake of support, attendance/engagement indicators and pupil voice). This policy will be reviewed at least every 2 years, and sooner if national guidance changes or if there are significant changes to staffing or local pathways.

Linked policies and documents

- [Safeguarding and Child Protection Policy](#)
- [Behaviour Policy and exclusions/suspensions procedures](#)
- [Attendance Policy](#)
- [Anti-bullying Policy](#)
- [SEND Policy and Information Report](#)
- [Supporting Pupils with Medical Conditions](#)
- [Online Safety Policy](#)
- [Equality and Accessibility Policies](#)
- [RSHE/PSHE Policy](#)

Appendix 1: Quick reference - what to do if you are worried about a pupil

- If there is immediate risk (suicide attempt, serious self-harm, threats to harm others): stay with the pupil, send for DSL/Mental Health Lead, and follow emergency procedures (999 / NHS 111 / A&E).
- If you have a mental health concern but no immediate risk: speak to the pupil (if appropriate), record on CPOMS, and inform the Mental Health Lead/Deputy.
- Do not promise confidentiality. Explain you may need to share information to keep them safe.
- Record facts, not opinions. Include the pupil's words and agreed next steps.

Appendix 2: Supporting conversation prompts

Useful prompts (avoid 'Why?'):

- Thank you for telling me. That sounds really hard.
- Can you tell me what's been going on recently?
- What helps when it feels like this?
- Is there anything that makes things worse?
- Who do you feel safe talking to in school?
- What would you like to happen next?

Appendix 3: Signposting (national)

Pupils/parents can be signposted to:

- NHS 111 (urgent advice) and 999 (emergency).
- Kooth (online support for young people - availability varies by area).
- YoungMinds (information and parent helpline).
- Shout 85258 (24/7 text support).
- Samaritans 116 123 (24/7).
- MindEd (free online learning for professionals).
- Anna Freud Centre resources for schools and families.

Appendix 4: References (national guidance)

- DfE. Keeping Children Safe in Education (current version).
- DfE. Mental health and behaviour in schools (advice).
- DfE. Promoting children and young people's mental health and wellbeing (guidance).
- DfE. Mental health and wellbeing support in schools and colleges (whole school/college approach).
- DfE. Relationships Education, Relationships and Sex Education (RSE) and Health Education (statutory guidance).
- NICE guidance on social and emotional wellbeing in secondary education.