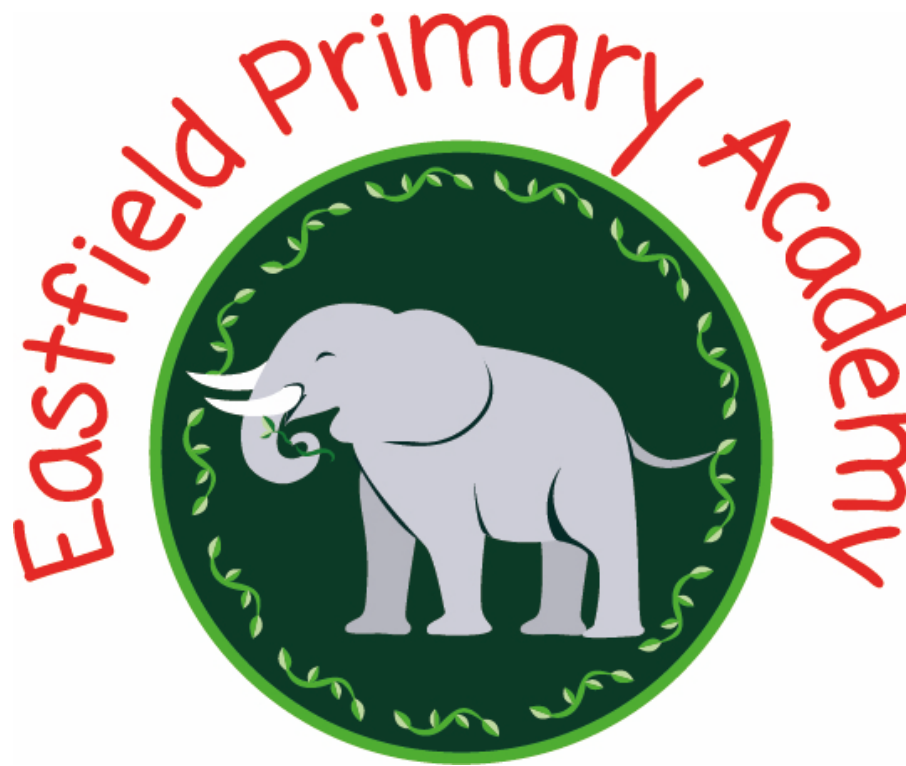




Mental Health and Wellbeing Policy

2026-2027

Policy commitment

Eastfield Primary Academy promotes positive mental health and wellbeing through a safe, inclusive and nurturing culture, early identification of need, proportionate support and effective partnership with families and specialist services.

Policy owner	Senior Mental Health Lead
Senior Mental Health Leads	Jayne Lord, Caroline Pell and Kerry Thompson
Approved by	Academy Governing Body / Trust
Approval date	September 2026
Next review	September 2027, or earlier following significant statutory or local change
Applies to	Pupils, staff, volunteers, governors and the wider academy community

1. Purpose and scope

This policy sets out the academy's whole-school approach to promoting mental health and wellbeing, identifying emerging needs, providing early support and securing access to specialist help. It should be read alongside the Safeguarding and Child Protection, SEND, Behaviour, Anti-bullying, Attendance, Medical Needs, Equality, RSHE, Staff Code of Conduct and Employee Wellbeing policies.

The policy supports pupils and staff but does not replace assessment, diagnosis or treatment by appropriately qualified health professionals. It applies during the school day, on educational visits, in wraparound provision and, where relevant, to concerns arising online or beyond school that affect safety, wellbeing or education.

2. Legal and guidance framework

The academy has regard to current legislation and statutory or departmental guidance, including:

- Children Act 1989 and Children Act 2004, as amended
- Education Act 2002, particularly the duty to safeguard and promote pupils' welfare
- Equality Act 2010, including the duty to make reasonable adjustments for disabled pupils and staff
- Children and Families Act 2014 and the SEND Code of Practice: 0 to 25 years
- Keeping Children Safe in Education 2026
- Working Together to Safeguard Children 2026
- Relationships Education, Relationships and Sex Education and Health Education statutory guidance in force from 1 September 2026
- DfE guidance on promoting and supporting mental health and wellbeing in schools and colleges
- Mental health issues affecting a pupil's attendance: guidance for schools
- UK GDPR and the Data Protection Act 2018
- Health and Safety at Work etc. Act 1974, where staff wellbeing and workplace stress are concerned

This policy is not a substitute for the academy's safeguarding procedures. Where a mental health concern is also a safeguarding concern, safeguarding procedures take priority.

3. Definitions and principles

Mental health is part of overall health. It can change over time and is influenced by individual, family, school, community and wider factors. Experiencing distress does not necessarily indicate a mental health condition. Staff should notice, listen, record and refer concerns, but must not diagnose.

Our approach is:

- child-centred, strengths-based and trauma-informed
- inclusive and anti-discriminatory, with due regard to culture, faith, disability, neurodiversity and communication needs
- proportionate to need and based on the least intrusive effective support
- developed with pupil and parent or carer participation wherever safe and appropriate
- integrated with safeguarding, SEND, attendance, behaviour and curriculum systems
- underpinned by appropriate information sharing, confidentiality and record keeping
- reviewed for impact rather than activity alone

4. Whole-school approach

Eastfield adopts the eight principles of an evidence-informed whole-school approach.

Principle	How this is implemented
Leadership and management	Named senior leadership, clear governance oversight, aligned policies and planned improvement activity.
Ethos and environment	A safe, calm, respectful and inclusive culture in which pupils know trusted adults and feel able to seek help.
Curriculum teaching and learning	Planned, sequenced and age-appropriate teaching through RSHE, PSHE and the wider curriculum.
Pupil voice	Pupils influence provision through discussion, surveys, EAST Team etc.
Staff development and wellbeing	Induction, safeguarding updates, role-appropriate training, supervision or support and access to employee wellbeing arrangements.
Identifying need and monitoring impact	Consistent recording, assessment, graduated response and review using attendance, behaviour, safeguarding, progress and voice data.
Targeted support and referral	Clear thresholds, evidence-informed school support and timely referral to local services.
Parents and carers	Early, respectful partnership, transparent information and signposting, subject to safeguarding considerations.

5. Roles and responsibilities

The Principal and governing body / Trust will:

- provide strategic oversight and ensure this policy is implemented and reviewed
- ensure safeguarding, SEND, equality, health and safety and data protection duties are met
- consider patterns, impact evidence, staff capacity and resource implications
- promote a culture in which staff wellbeing is taken seriously without compromising pupil safety

The Senior Mental Health Leads will:

- lead and coordinate the whole-school approach
- maintain an up-to-date provision map and referral pathways
- support staff to identify need and select proportionate responses

- work closely with the DSL, SENCO, Pastoral Lead, Attendance and Welfare Officer and external partners
- coordinate staff development and monitor the quality and impact of provision
- report themes and priorities to senior leaders and governors while preserving confidentiality

The DSL and safeguarding team will:

- lead where concerns indicate harm, abuse, neglect, exploitation, self-harm, suicidal thoughts or immediate risk
- make or coordinate safeguarding referrals and multi-agency work
- ensure concerns and decisions are recorded promptly and securely
- consider the needs of children with a social worker, looked-after and previously looked-after children, young carers and others who may face additional barriers

The SENCO will:

- consider whether needs amount to or are associated with SEND
- co-ordinate the assess-plan-do-review processes and any reasonable adjustments
- liaise with parents, staff and relevant specialists
- ensure mental health support is aligned with SEN support plans, EHCPs and individual healthcare plans where applicable

All staff will:

- create safe, predictable and inclusive learning environments
- notice changes in presentation, listen without promising confidentiality, record facts and report concerns promptly
- follow safeguarding procedures immediately where risk or harm may be present
- implement agreed adjustments and support plans consistently
- avoid diagnosis, therapy beyond their competence, or investigating disclosures
- maintain professional boundaries and protect personal information

Pupils and parents or carers are encouraged to share concerns, contribute to plans and reviews, and seek urgent professional help when needed. A parent's refusal of support does not prevent the academy taking safeguarding action where required.

6. Promotion and prevention

Universal provision aims to strengthen belonging, emotional literacy, positive relationships, healthy routines, resilience and help-seeking. This includes:

- a safe and welcoming environment, consistent routines and positive relationships
- age-appropriate RSHE and PSHE teaching on emotions, self-regulation, relationships, online influences, healthy sleep, physical activity, coping with change and loss, and how to seek help
- opportunities for pupil participation, responsibility, reflection and celebration
- anti-bullying, attendance, inclusion and online safety work

- reasonable adjustments and accessible teaching for pupils with SEND
- partnership with families and signposting to community and health services
- careful preparation for transitions, bereavement, family change and other significant events

Sensitive content will be taught safely, developmentally appropriately and in line with the RSHE and safeguarding policies. Staff will not invite personal disclosures in a group setting and will follow safeguarding procedures if a disclosure occurs.

7. Identifying need

Possible indicators may include a sustained or marked change in attendance, attainment, concentration, communication, friendships, emotional regulation, sleep or eating patterns, self-care, behaviour, physical complaints, withdrawal, distress, risk-taking, hopelessness or comments about self-harm. No single indicator confirms a mental health condition.

Staff will consider contextual and protective factors, including bereavement, family stress, bullying or discrimination, online experiences, trauma, caring responsibilities, exploitation, poverty, housing insecurity, SEND, physical health and previous adversity. Particular care will be taken not to attribute behaviour automatically to a diagnosis or protected characteristic.

Immediate safeguarding rule

Any concern about abuse, neglect, exploitation, self-harm, suicidal thoughts, serious violence or immediate danger must be reported to the DSL or a deputy without delay and recorded on CPOMS in line with the Safeguarding and Child Protection Policy. Do not wait for a scheduled meeting or the end of the day.

8. Graduated response and provision map

Level	Typical presentation	Academy response	Review / escalation
1 Universal	Generally coping; brief, low-level or situational concern.	Trusted-adult conversation; classroom strategies; inclusive routines; curriculum support; monitor and record where appropriate.	Class teacher reviews. Escalate if concern persists, worsens or affects safety, attendance, learning or relationships.
2 Targeted	Concern is persistent, repeated or affecting daily functioning, attendance, learning or relationships.	Discuss with SMHL / SENCO / pastoral or safeguarding team; involve parents unless unsafe; assess need; agree time-limited	Named lead, review date and outcome measures. Escalate if support is ineffective, risk increases or

Level	Typical presentation	Academy response	Review / escalation
		targeted support, adjustments and desired outcomes; consider Early Help or health advice.	specialist assessment is indicated.
3 Specialist / high need	Significant, complex or enduring difficulty; substantial impairment; concern may require specialist assessment.	DSL / SMHL / SENCO coordinate referral or consultation with appropriate local health, social care or specialist service; continue reasonable school support and multi-agency planning.	Follow service advice and review safety, attendance, education and reintegration arrangements. Urgent action if risk increases.
Emergency / crisis	Immediate danger, serious injury, acute medical need or imminent risk of harm.	Keep the pupil supervised and in a safe, calm area; remove hazards only where safe; alert DSL and senior leader; call 999 for immediate danger or urgent medical emergency; contact parents unless doing so may increase risk; follow local safeguarding procedures.	Record actions and rationale the same day. Complete or update safety and reintegration planning with relevant professionals.

9. Assessment, planning and review

Support will normally follow assess-plan-do-review:

1. Assess: gather the pupil's views and relevant information from staff, parents and existing records; consider risk, strengths, communication and contextual factors.
2. Plan: identify the concern, desired outcomes, adjustments or intervention, responsible adults, review date, consent and information-sharing arrangements.
3. Do: deliver agreed support consistently, ensuring staff have the information required to keep the pupil safe and included.

4. Review: evaluate change using proportionate evidence such as pupil and parent voice, attendance, participation, behaviour, safeguarding information and educational engagement. Continue, adapt, step down or refer as indicated.

Interventions must be suitable for the pupil's age and needs, delivered by trained staff within their competence, and discontinued or adapted if they are ineffective or cause concern. Waiting for external support does not remove the academy's duty to provide reasonable, safe educational support.

10. Safeguarding, self-harm and crisis response

Concerns about self-harm or suicidal thoughts are safeguarding and health matters. Staff must remain calm, listen, take the concern seriously, avoid judgement, avoid promising secrecy and contact the DSL or deputy immediately. Staff should not conduct a clinical risk assessment or use a numerical risk score unless specifically trained and authorised within an agreed professional framework.

- A pupil at immediate risk must not be left alone. Use the least restrictive safe response and summon assistance.
- For serious injury, overdose, loss of consciousness, breathing difficulty or imminent danger, call 999.
- For urgent health advice when the situation is not immediately life-threatening, the DSL or parent should use the appropriate NHS route, including NHS 111, GP or local urgent mental health service.
- Parents or carers should normally be informed promptly, unless this may place the child at greater risk or prejudice a safeguarding response. The DSL will decide and record the rationale.
- Do not ask the pupil to display injuries or search their person. First aid must be provided by an appropriately trained person, preserving dignity and privacy.
- A written safeguarding record must be made on CPOMS as soon as practicable and on the same working day. Record the pupil's words where possible, observations, actions, advice received and decisions.
- A proportionate safety, support and reintegration plan will be agreed when required, with the pupil, family and relevant professionals.

11. Working with parents, carers and external services

The academy will communicate respectfully and involve parents or carers early, unless safeguarding considerations indicate otherwise. Staff will explain the concern, what the academy can and cannot provide, the proposed support, how information will be used and when progress will be reviewed.

Referral decisions will be based on need, risk, local thresholds and service criteria. Routes may include the GP, School Nursing Team, Mental Health Support Team, local children and young people's mental health services, Educational Psychology, Early Help / Family Help, children's social care and commissioned counselling or voluntary-sector services. The SMHL and DSL will maintain the current local directory rather than relying on provider names in this policy, which may change.

12. SEND, equality and vulnerable groups

Not all pupils with mental health difficulties have SEND. Where a difficulty is persistent and creates a significantly greater difficulty in learning, the SENCO will consider SEN support through the graduated approach. Some mental health conditions may meet the Equality Act 2010 definition of disability. The academy will make reasonable adjustments and avoid discrimination arising from disability.

Support will be adapted for communication needs, neurodiversity, sensory needs and developmental level. The academy will work closely with the designated teacher, Virtual School Head and social worker where relevant for looked-after, previously looked-after and children with a social worker. Staff will be alert to barriers to disclosure or help-seeking, including discrimination, language, disability and fear of stigma.

13. Attendance, behaviour and education

Mental health difficulties may affect attendance and behaviour, but assumptions must not be made. The academy will seek to understand underlying need, maintain high expectations with appropriate support, use reasonable adjustments and avoid punitive responses to behaviour arising from unmet need.

Attendance support will follow the Attendance Policy and current DfE guidance, with collaborative, time-limited plans and appropriate medical evidence only where reasonably required.

Where absence or a period of crisis affects education, the academy will plan safe reintegration, identify a trusted adult, agree adjustments and maintain access to learning in line with the pupil's needs and professional advice.

14. Confidentiality, consent and information sharing

Staff must never promise absolute confidentiality. Information will be shared on a need-to-know basis to safeguard the pupil, provide support and meet legal duties. Consent will be sought where appropriate, but safeguarding information may be shared without consent when there is a lawful basis and sharing is necessary and proportionate. Decisions and rationale will be recorded.

Mental health information is sensitive personal data. Records will be factual, relevant, accurate, secure and retained in accordance with the academy's data protection and retention arrangements.

Safeguarding records will be managed under the Safeguarding and Child Protection Policy.

15. Staff mental health and wellbeing

The academy recognises its responsibilities for staff health, safety and welfare and will seek to identify and reduce avoidable workplace stressors. Support includes clear role expectations, appropriate line management, access to professional development, consultation about change, reasonable adjustments, occupational health or HR advice where appropriate, and the Trust's current employee assistance and wellbeing services.

Staff should speak to their line manager, Principal or HR if work is affecting their health. A concern about a colleague's immediate safety should be escalated urgently and emergency services contacted.

where necessary. Information will be handled sensitively and in line with employment, safeguarding and data protection requirements.

16. Training and supervision

All staff receive safeguarding training and updates that include recognising and responding to mental health concerns. Additional role-appropriate training is provided for the SMHL, DSL team, SENCO, pastoral staff and those delivering interventions. Training will clarify professional boundaries, referral routes, recording and crisis procedures. Staff delivering emotionally demanding work will have access to appropriate debrief, supervision or management support.

17. Monitoring, evaluation and governance

The SMHL will evaluate implementation at least annually and report themes to senior leaders and governors. Evaluation will protect confidentiality and consider:

- pupil, parent and staff voice
- timeliness and appropriateness of referrals and reviews
- attendance, persistent absence, suspensions, bullying, behaviour and safeguarding patterns
- educational engagement and progress for pupils receiving support
- reach and outcomes of targeted interventions, including any disproportionality by pupil group
- staff training, confidence, workload and referral-pathway awareness
- quality of multi-agency working and identified gaps in provision

The academy will not treat increased reporting automatically as deterioration; it may reflect improved awareness and trust. Findings will inform the Academy Improvement Plan, provision map, curriculum, staff development and resource decisions.

18. Complaints and review

Concerns about implementation should normally be raised with the class teacher, SMHL, SENCO or Principal as appropriate. Formal complaints will be managed under the academy's Complaints Policy. Safeguarding concerns must be raised immediately through safeguarding procedures and must not wait for the complaints process.

This policy will be reviewed annually and sooner if legislation, statutory guidance, local safeguarding arrangements, service pathways or academy practice change significantly.

Appendix 1: Staff quick response

If you notice or receive...	Do this
A low-level, brief concern	Listen, reassure, use ordinary classroom or pastoral support, and monitor. Record if relevant.
A repeated or worsening concern	Record on CPOMS where appropriate and consult the SMHL, SENCO, pastoral or safeguarding team promptly.
A disclosure or indication of abuse, neglect or exploitation	Listen, do not investigate, do not promise confidentiality, and report to the DSL immediately.
Self-harm or suicidal thoughts	Stay with the pupil, alert the DSL immediately, remove obvious hazards only where safe, and follow the crisis procedure.
Immediate danger or medical emergency	Call 999, provide first aid within competence, alert senior leaders and the DSL, and contact parents unless unsafe.
Uncertainty	Speak to the DSL or a deputy. It is better to share a concern than to leave it unreported.

Appendix 2: Minimum support-plan content

- pupil's views, strengths, needs and preferred communication
- identified triggers, early warning signs and protective factors
- reasonable adjustments and strategies that help
- trusted adults and how the pupil can access support
- actions in and out of class, including transitions and unstructured times
- parent or carer involvement and relevant professional advice
- information-sharing and confidentiality arrangements
- risk and emergency actions where required
- named lead, named external agency (where involved), start date, desired outcomes and review date
- reintegration or step-down arrangements

Appendix 3: Related academy documents

- Safeguarding and Child Protection Policy
- SEND Policy and SEND Information Report
- Behaviour Policy
- Anti-bullying Policy
- Attendance Policy
- Medical Needs / Supporting Pupils with Medical Conditions Policy
- Relationships, Sex and Health Education Policy
- Equality Information and Objectives
- Online Safety Policy
- Staff Code of Conduct
- Employee Wellbeing / Stress at Work arrangements
- Data Protection and Records Retention policies
- Complaints Policy