

Date: September 2025

Review: September 2026

Primrose Hill School Social, Emotional and Mental Health Policy



Social, Emotional and Mental Health (SEMH) Policy

At Euxton Primrose Hill, we understand that school can significantly impact on children's mental health and wellbeing and this policy outlines our commitment to ensuring we focus on the social, emotional and mental health needs of our pupils.

Through the successful implementation of this policy, we aim to:

- Promote equal opportunities for pupil with SEMH difficulties
- Ensure all pupil with SEMH difficulties are identified and appropriately supported
- Through early intervention minimise the risk of SEMH difficulties escalating into physical harm
- Promote a positive outlook regarding pupils with SEMH difficulties
- Eliminate prejudice towards a pupil with SEMH difficulties

This policy applies to all members of our school community: Children, staff, Governors, families and people within our local community and should be read in conjunction with our SEND policy, SEND information report and Behaviour Policy.

AIMS

A primary aim of our school is that every member of the community is respected, supported and valued and that every member promotes good mental health and well-being. We aim to do this by creating a culture where every member:

- Promotes high expectations of positive behaviour, courtesy, mutual respect and consideration of others, within and beyond the school environment;
- Provide a nurturing environment where children are safe and secure, to become positive, responsible and increasingly independent members of the school community and ultimately of wider society;
- Help all children to understand, regulate and manage emotions and to increasingly show empathy and understanding towards others;
- Encourages and celebrates individual strengths and achievement of children and staff;
- Know how to support staff, children and families who experience poor mental health

We will aim to build a community that values kindness, care, respect and empathy for others, and senior leaders will model these core values.

Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Children and Families Act 2014
- Health and Social Care Act 2012
- Equality Act 2010
- Education Act 2002
- Mental Capacity Act 2005
- Children Act 1989

This policy has been created with regard to the following DfE guidance:

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- DfE (2025) *Keeping Children Safe in Education* (KCSIE), which includes updated guidance on online safety, misinformation, disinformation, generative AI, and safeguarding in alternative provision

- DfE (2018) *Mental health and behaviour in schools*
- DfE (2016) *Counselling in schools: a blueprint for the future*
- DfE (2015) *Special educational needs and disabilities code of practice: 0 to 25*
- DfE guidance on data protection for schools"

Roles and responsibilities

The school's leadership as a whole is responsible for:

- Using a preventative approach to create a safe and calm environment where mental health problems are less likely to occur, in order to improve the mental health and wellbeing of the school community and instil resilience in pupils. A preventative approach includes teaching pupils about mental wellbeing through the curriculum and reinforcing these messages in our activities and ethos.
- Ensuring that only appropriately trained professionals should attempt to make a diagnosis of a mental health problem as outlined in the schools referral pathway.
- Equipping staff with the knowledge required to identify pupils whose behaviour suggests they may be experiencing a mental health problem or be at risk of developing one.
- Raising awareness and employing efficient referral processes in order to help pupils access evidence-based early support and interventions.
- Working effectively with external agencies to ensure the school can provide swift access or referrals to specialist support and treatment.
- Identifying and supporting pupils with SEND, and considering how to use SEND resources to provide support for pupils with mental health difficulties that amount to SEND. Identifying where wellbeing concerns represent safeguarding concerns, and ensuring that appropriate safeguarding referrals are made in line with the Child Protection and Safeguarding Policy.

The SEMH Lead is responsible for:

- Overseeing the whole-school approach to mental health, including how this is reflected in policies, the curriculum and pastoral support, how staff are supported with their own mental health, and how the school engages pupils and parents with regards to pupils' mental health and awareness.
- Advising on the deployment of the school's budget and other resources in order to effectively meet the needs of pupils with SEMH difficulties.
- Being a key point of contact with external agencies, especially the mental health support services and mental health support teams.
- Referring pupils with SEMH difficulties to external services, e.g. specialist children and young people's mental health services (CAMHS), to receive additional support where required.
- Overseeing the outcomes of interventions on pupils' education and wellbeing.
- Liaising with parents of pupils with SEMH difficulties, where appropriate.
- Liaising with other schools, educational psychologists, health and social care professionals, and independent or voluntary bodies.
- Liaising with the potential future providers of education, such as secondary school teachers, to ensure that pupils and their parents are informed about options and a smooth transition is planned.
- Leading mental health CPD.

All staff are responsible for:

- Being aware of the signs of SEMH difficulties.
- Being aware that mental health problems can, in some cases, be an indicator that a pupil has suffered or is at risk of suffering abuse, neglect or exploitation.
- Being aware of the needs, outcomes sought and support provided to any pupils with SEMH difficulties.
- Keeping the relevant school leaders -to-date with any changes in behaviour, academic developments and causes of concern. The relevant figures of authority include: SLT/SENCO/Learning Mentor/SEMH lead.

Teaching Staff are responsible for:

- Planning and reviewing support for their pupils with SEMH difficulties in collaboration with parents, the SENCO and, where appropriate, the pupils themselves.
- Setting high expectations for every pupil and aiming to teach them the full curriculum, whatever their prior attainment.
- Planning lessons to address potential areas of difficulty to ensure that every pupil achieves their full potential.
- Being responsible and accountable for the progress and development of the pupils in their class.

The DSL is responsible for:

- Acting as a source of support, advice and expertise for all staff.
- Liaising with staff on matters of safety, safeguarding and welfare.
- Liaising with the mental health lead and, where available, the Mental Health Support Team, where safeguarding concerns are linked to mental health. The school works in collaboration with mental health support workers who are trained professionals who act as a bridge between schools and mental health agencies.

Staff training

The SLT ensures that all teachers have a clear understanding of the needs of all pupils, including those with SEMH needs and promotes CPD to ensure that staff can recognise common symptoms of mental health problems, understand what represents a concern, and know what to do if they believe they have spotted a developing problem. Clear processes are in place to help staff who identify SEMH problems in pupils escalate issues through clear referral and accountability systems.

Staff receive training to ensure they:

- Understand risks associated with online content, including misinformation, disinformation, conspiracy theories, and generative AI, and know how to safeguard pupils appropriately
- Are aware of updated guidance regarding alternative provision and their safeguarding responsibilities within these settings

Creating a supportive whole-school culture

The school utilises various strategies to support pupils who are experiencing high levels of psychological stress, or who are at risk of developing SEMH problems, including:

- Teaching about mental health and wellbeing through curriculum subjects such as PSHE
- Positive classroom management
- Signposting families and referring children to external agency support teams
- Working with parents
- Adult support and therapies where needed

The school recognises the growing risks posed by online content, including misinformation, disinformation, conspiracy theories, and generative AI. All staff are trained to identify, manage, and escalate concerns related to online safety in line with KCSIE 2025 and the school's Online Safety Policy.

Identifying signs of SEMH difficulties

The school is committed to identifying pupils with SEMH difficulties at the earliest stage possible. Staff are trained to know how to identify possible mental health problems and understand what to do if they spot signs of emerging difficulties. Staff members are aware of the signs that may indicate if a pupil is struggling with their SEMH. The signs of SEMH difficulties may include, but are not limited to, the following list:

- Anxiety
- Low mood
- Being withdrawn
- Avoiding risks
- Unable to make choices
- Low self-worth
- Isolating themselves
- Refusing to accept praise
- Failure to engage
- Poor personal presentation
- Lethargy/apathy
- Daydreaming
- Unable to make and maintain friendships
- Speech anxiety/reluctance to speak
- Task avoidance
- Challenging behaviour
- Restlessness/over-activity
- Non-compliance
- Mood swings
- Impulsivity
- Physical aggression
- Verbal aggression
- Perceived injustices
- Disproportionate reactions to situations
- Difficulties with change/transitions
- Absconding
- Eating issues
- Lack of empathy
- Lack of personal boundaries
- Poor awareness of personal space

When the school suspects that a pupil is experiencing mental health difficulties, the school will assess the child's difficulties and follow our Emotional and Mental Health Graduated Response- Tier 2 (see appendix). This will also be noted on CPOMS and followed up by SLT or DSL.

Staff members will observe, identify and monitor the behaviour of pupils potentially displaying signs of SEMH difficulties; however, only medical professionals will make a diagnosis of a mental health condition. Pupil assessments may be carried out using Boxall Profile & PIVATs PSED as a tool to assess and plan targeted provision.

Stress and mental health

The school recognises that short-term stress and worry is a normal part of life and that most pupils will face mild or transitory changes that induce short-term mental health effects. Staff are taught to differentiate between 'normal' stress and more persistent mental health problems.

SEND and SEMH

The school recognises it is well-placed to identify SEND at an early stage and works with partner agencies to address these needs. The school's full SEND identification and support procedures are available in the SEND Policy. Where pupils have certain types of SEND, there is an increased likelihood of mental health problems. For example, children with autism or learning difficulties are significantly more likely to experience anxiety. Early intervention to address the underlying causes of disruptive behaviour includes an assessment of whether

appropriate support is in place to address the pupil's SEND.

The graduated response is used to determine the correct level of support to offer. All staff understand their responsibilities to pupils with SEND, including pupils with persistent mental health difficulties. The SENCO ensures that staff understand how the school identifies and meets pupils' needs, provides advice and support as needed, and liaises with external SEND professionals as necessary.

Adverse childhood experiences (ACEs) and other events that impact pupils' SEMH

The balance between risk and protective factors is disrupted when traumatic events happen in pupils' lives, such as the following:

- Loss or separation: This may include a death in the family, parental separation, divorce, hospitalisation, loss of friendships, family conflict, a family breakdown that displaces the pupil, being taken into care or adopted, or parents being deployed in the armed forces.
- Life changes: This may include the birth of a sibling, moving house, changing schools or transitioning between schools.
- Traumatic experiences: This may include abuse, neglect, domestic violence, bullying, violence, accidents or injuries.
- Other traumatic incidents: This may include natural disasters or terrorist attacks.

The school supports pupils when they have been through ACEs, even if they are not presenting any obvious signs of distress – early help is likely to prevent further problems. Support may come from the school's existing support systems or via specialist staff and support services. It may also include Emotional Literacy Support through the Learning Mentor and open access to the PRIMROSE POD if a child is experiencing distress throughout the school day.

Vulnerable groups

Some pupils are particularly vulnerable to SEMH difficulties. These 'vulnerable groups' are more likely to experience a range of adverse circumstances that increase the risk of mental health problems. Staff are aware of the increased likelihood of SEMH difficulties in pupils in vulnerable groups and remain vigilant to early signs of difficulties.

Vulnerable groups include the following:

- Pupils who have experienced abuse, neglect, exploitation or other adverse contextual circumstances
- Children in Need
- LAC or previously LAC
- Socio-economically disadvantaged pupils, including those in receipt of, or previously in receipt of, free school meals and the pupil premium

These circumstances can have a far-reaching impact on behaviour and emotional states. These factors will be considered when discussing the possible exclusion of vulnerable pupils.

Risk factors and protective factors

There are a number of risk factors beyond being part of a vulnerable group that are associated with an increased likelihood of SEMH difficulties, these are known as risk factors. There are also factors associated with a decreased likelihood of SEMH difficulties, these are known as protective factors. The table below displays common risk factors for SEMH difficulties (as outlined by the DfE) that staff remain vigilant of, and the protective factors that staff look for and notice when missing from a pupil:

	Risk factors	Protective factors
In the pupil	<ul style="list-style-type: none"> • Genetic influences • Low IQ and learning disabilities • Specific development delay or neuro-diversity • 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 and sociability • Being a planner and having a belief in control • Humour • A positive attitude • Experiences of success and achievement • Faith or spirituality • Capacity to reflect
In the pupil's 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 relationships or the absence of severe discord
In the school	<ul style="list-style-type: none"> • Bullying including online (cyber bullying) • Discrimination • Breakdown in or lack of positive friendships • Deviant peer influences • Peer pressure 	<ul style="list-style-type: none"> • Clear policies on behaviour and bullying • Staff behaviour policy (also known as code of conduct) • 'Open door' policy for children to raise problems

	<ul style="list-style-type: none"> • Peer-on-peer abuse • Poor pupil-to-teacher/school staff relationships 	<ul style="list-style-type: none"> • 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 are part of, effective multi-agency working • Appropriate procedures in place to ensure staff are confident enough to 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

SEMH intervention and support

The curriculum for PSHE and RSHE focusses on promoting pupils' resilience, confidence and ability to learn. Positive classroom management and working in small groups is utilised to promote positive behaviour, social development and high self-esteem.

Learning Mentor support and targeted nurture intervention is offered to pupils who require it, and the relevant external services are utilised where appropriate; For example, support from a Senior Mental Health Practitioner.

Informal support such as Play therapy and Social Stories are also used to support children with SEMH needs. Where appropriate, parents have a direct involvement in any intervention regarding their child. Our Learning Mentor and Nurture Lead are used to encourage and support all pupils in school so they have someone to talk to and share their worries. Well-established nurture groups are in place to address any emerging SEMH difficulties in pupils, including individualised support plans using PIVATs PSED targets.

Building positive relationships: children and staff

It is a professional responsibility for all our staff to build positive and supportive relationships with pupils, parents and colleagues they work with. Teachers and support staff are role models for children and other adults. They understand the importance of building positive relationships with everyone.

We are committed to preparing good relationships by:

- Seeing each other as an individual, with strengths, needs and different windows of tolerance
- Understand how the brain works and the flight/fight response
- Ensuring we have a secure understanding of the social and emotional development of children, and can apply this to our relationships-led approach
- Ensuring that the physical environment of our school ensures our children feel safe

We commit to building and maintaining good relationships by:

- Meeting and greeting pupils at the door in the mornings and after key transitions such as playtimes and PE sessions.
- We prepare children in advance of changes (such as different teachers or changes in the timetable) using social stories or whole-class circle time.
- We act light-hearted, positive, joyful, and kind in our tone of voice and our body and facial expressions. We avoid harsh voices, shouting or shaming of any kind.
- We use our words, tones, facial expressions and non-verbal communication in ways with soothe and calm. We apply the same approach to colleagues and parents, whether it is verbally, or through email and messages.
- Being accepting of other people's views, opinions, feelings and practices.
- Being curious about other people's lives, behaviours, reactions and noticing when things are different or have changed.
- Being empathetic and having compassion by being attuned as far as we can to other people's moods.
- Ensuring consistency and fairness.
- Providing opportunities across the school day to develop peoples' ability to see themselves, their relationships and the world more positively.
- Modelling the positive attitudes, values and behaviour expected of everyone in the community.

We commit to repairing good relationships by:

- Using restorative conversations to repair and restore a relationship. With children, we use age appropriate resources for building trust and learning from mistakes, and in line with our behaviour policy, we encourage children to complete reflection time tasks.
- Apologising when we have made a mistake

Working with alternative provision (AP) settings

The school works with AP settings to develop plans for reintegration back into the school where appropriate. The school shares information with AP settings that enables clear plans to be developed to measure pupils' progress towards reintegration into mainstream schooling, further education or employment. These plans link to EHC plans for pupils with SEND.

Behaviour and exclusions

When exclusion is a possibility, the school considers contributing factors, which could include mental health difficulties. Where there are concerns over behaviour, the school carries out an assessment to determine

whether the behaviour is a result of underlying factors such as undiagnosed learning difficulties, speech and language difficulties, child protection concerns or mental health problems. Where underlying factors are likely to have contributed to the pupil's behaviour, the school considers whether action can be taken to address the underlying causes of the disruptive behaviour, rather than issue an exclusion.

Permanent exclusion will only be used as a last resort. In all cases, the school balances the interests of the pupil against the mental and physical health of the whole school community.

Working with parents

The school works with parents wherever possible to ensure that a collaborative approach is utilised. The school ensures that pupils and parents are aware of the mental health support services available from the school and are signposted to these through Learning Mentor Signposting and the Wednesday Weekly Newsletter. Parents and pupils are expected to seek and receive support elsewhere, including from their GP, NHS services, trained professionals working in CAMHs, and other sources.

Safeguarding

All staff are aware that SEMH issues can, in some cases, be an indicator that a pupil has suffered or is at risk of suffering abuse, neglect or exploitation. If a staff member has a SEMH concern about a pupil that is also a safeguarding concern, they take immediate action in line with the Child Protection and Safeguarding Policy and speak to the DSL.

Monitoring and review

The policy is reviewed on a biennial basis by the Senior Mental Health Lead (Mrs Emma Swinburn DHT/SENDCO) in conjunction with the governing body – any changes made to this policy are communicated to all members of staff. This policy is reviewed in light of any serious SEMH-related incidents and should be read in conjunction with the school's behaviour policy and relationships policy.

The policy is reviewed on a biennial basis by the Senior Mental Health Lead in conjunction with the governing body. Any updates to statutory guidance, including KCSIE, will trigger a review. The next scheduled review date for this policy is September 2026.