ST GEORGE'S SCHOOL
A CHURCH OF ENGLAND ACADEMY

Mental health & Wellbeing Policy

Approved by:	G Warnock
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Contents

1. Aims

At St George's, we are committed to supporting the mental health and wellbeing of pupils, parents, carers, staff, and other stakeholders.

This policy focuses specifically on pupils' mental health and wellbeing. It aims to:

Promote Positive Wellbeing: Set out our school's strategic approach to fostering positive mental health for all pupils across our school.

Guide Staff Roles: Provide clear guidance to staff on their role in supporting pupils, including how to build and maintain an inclusive culture where pupils feel safe to talk about and reflect on their mental health experiences.

Facilitate Early Identification: Support staff to confidently identify and respond to early warning signs of mental health issues.

Inform Families: Clear up what support pupils and parents/carers can expect from our school regarding mental health, and provide them with direct access to helpful resources.

This policy was written in close consultation with the Senior Leadership Team (SLT) and the Safeguarding Team. It must be read alongside the following school policies:

- SEND Policy
- Child Protection & Safeguarding Policy
- Behaviour Policy
- Anti-Bullying Policy

2. Legislation and Guidance

This policy was authored with strict regard to the following statutory frameworks and legislation:

- The Equality Act 2010
- The Data Protection Act 2018
- Articles 3 and 23 of the UN Convention on the Rights of the Child
- Keeping Children Safe in Education (KCSIE 2025)
- Working Together to Safeguard Children (2023)
- The Children and Families Act 2014
- SEND Code of Practice: 0 to 25 Years (2015, updated 2020)
- DfE: Mental Health and Behaviour in Schools (2018, updated 2021)
- DfE/NHS England: Promoting and Supporting Mental Health and Wellbeing in Schools and Colleges (2021)

The 8 Principles of a Whole-School Approach (PHE/DfE)

This policy is framed around the PHE/DfE 8 Principles of a Whole-School Approach to Mental Health and Wellbeing – the framework Ofsted uses when evaluating schools' mental health provision:

- Leadership and management that supports and champions efforts to promote mental health and wellbeing
- An ethos and environment that promotes respect and values diversity
- Curriculum, teaching and learning to promote resilience and support social and emotional learning
- Student voice to influence decisions relating to mental health and wellbeing
- Staff development to support their own wellbeing and that of pupils
- Identifying need and monitoring the impact of interventions
- Working with parents, carers and families
- Targeted support and appropriate referrals to specialist support

Core Definition

We adopt the World Health Organisation's (WHO) official definition of mental health and wellbeing:

"...a state of well-being in which every individual realises their own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community."

3. Roles and Responsibilities

Certain members of staff have extra duties to lead on mental health, wellbeing, and safeguarding in school:

- **Senior Mental Health Lead**
- **Headteacher**
- **Designated Safeguarding Lead (DSL) & Deputy Designated Safeguarding Leads (DDSL)**
- **Special Educational Needs Co-ordinator (SENCO)**
- **Attendance Lead / Designated Safeguarding Person (DSP)** linked to attendance calls for specific year groups.

4. Warning Signs

All staff must remain vigilant for signs that a pupil's mental health is deteriorating. Key indicators include changes or presentations across the following areas:

Behavioural & Emotional Indicators

- **Mood:** Drastic shifts in mood or baseline energy levels.
- **Attitude:** Sudden drops in lesson engagement or academic attainment.
- **Expression:** Voicing feelings of hopelessness, anxiety, worthlessness, or failure.

- **Risk-Taking:** Misuse of drugs or alcohol; talking or joking about self-harm or suicide.
- **Social:** Increasing social isolation from friends and peers.

Physical & Visible Indicators

- **Physical Health:** Rapid weight loss or gain; physical pain or nausea with no obvious medical cause; visible self-inflicted injuries.
- **Habits:** Fluctuations in eating or sleeping patterns; a noticeable decline in personal hygiene.
- **Concealment:** Secretive behaviour; wearing layers or clothing to cover parts of the body they wouldn't previously have covered; refusing to participate in P.E. or acting secretively when changing clothes.

5. Managing Disclosures

If a pupil makes a mental health or safeguarding disclosure regarding themselves or a peer, staff must adhere to the following protocol:

- **Demeanour:** Remain calm, reassuring, and completely non-judgmental.
- **Focus:** Prioritize the pupil's immediate emotional and physical safety. Avoid investigating "why" they feel this way or offering personal advice.
- **Compliance:** Always follow the school's Safeguarding Policy. Pass all concerns directly to the DSL and the Senior Mental Health Lead.

Record Keeping

All disclosures must be recorded and stored securely on MyConcern. Records must strictly include:

1. Full name of the staff member writing the report.
2. Full name of the pupil(s) involved.
3. Precise date, time, and location of the disclosure.
4. The exact context in which the disclosure was made.
5. Any specific questions asked or immediate support offered by the staff member.

6. Confidentiality

Staff **must never** promise absolute secrecy to a pupil. The limits of confidentiality must be explained clearly upfront.

Why Disclosures Cannot Be Kept Secret:

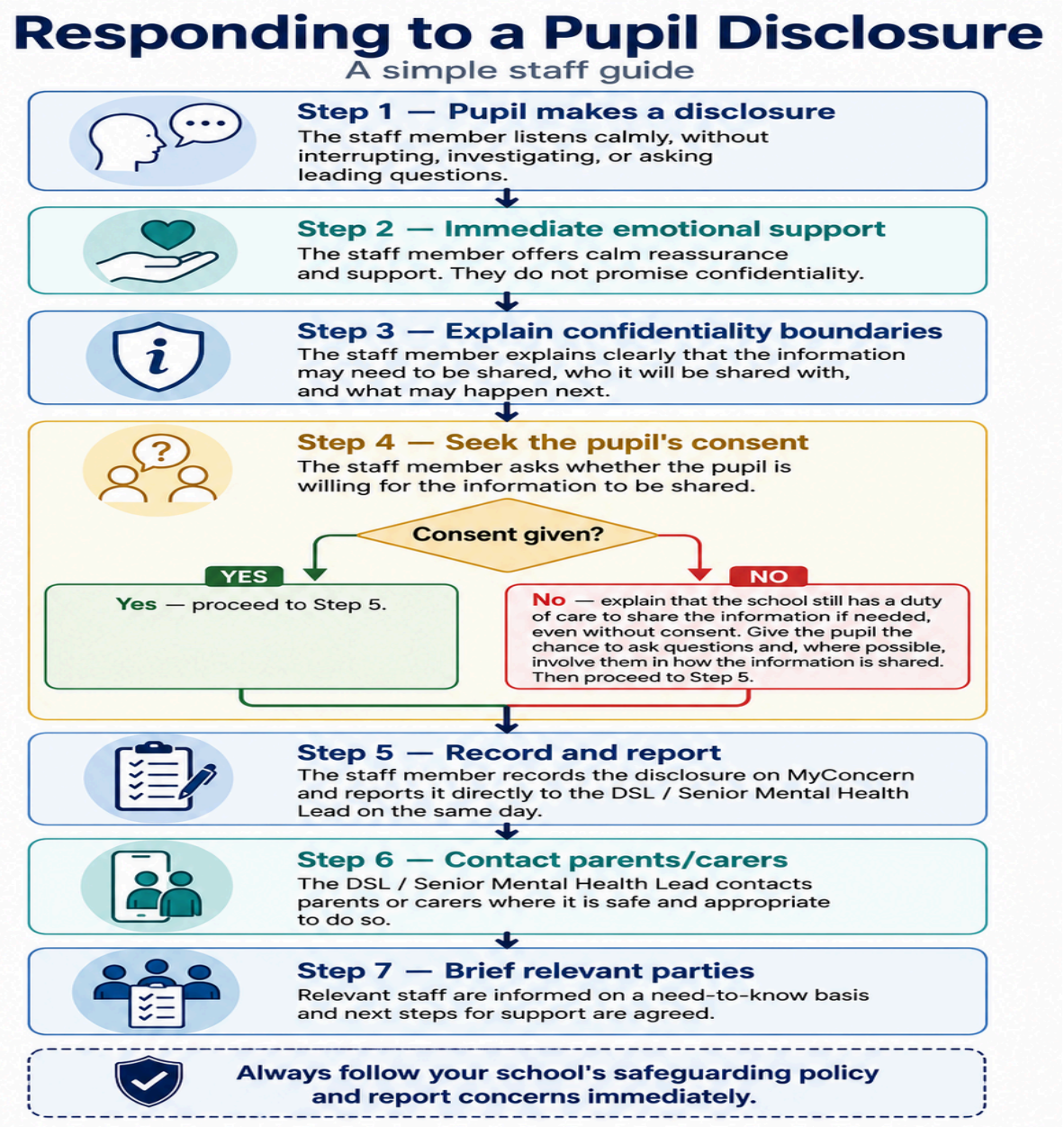
- **Staff Wellbeing:** Holding sole responsibility for a pupil's safety can heavily impact a staff member's own mental health and wellbeing.
- **Continuity of Care:** The support put in place cannot rely entirely on a single staff member being present at school.

- **Collaborative Support:** A wider staff network allows professionals to share ideas on how to best support the pupil.

Information Sharing Protocol

- Disclosures must always be shared with at least one appropriate colleague (usually the DSL). Further sharing is strictly on a **need-to-know** basis.
- Before sharing info with a third party, the staff member will discuss it with thepupil to explain *who* they will share it with, *what* they will share, and *why*.
- Staff will attempt to get consent, but the safety of the pupil always comes first.
- Parents/carers will be informed unless there is a specific child protection concern (in which case, standard child protection policy takes precedence).

6.1 Step-by-Step Confidentiality & Disclosure Process



7. Supporting Pupils

7.1 Baseline Support for All Pupils

To promote positive mental health and wellbeing across the school, St George's provides:

- **Awareness:** Focused assemblies, tutor periods, PSHE lessons, and Mental Health Awareness Week campaigns.
- **Oversight:** Strategic direction managed via our appointed Senior Mental Health Lead.
- **Pastoral Care:** Robust on-the-ground support from our Pastoral Support Workers.
- **Signposting:** Dedicated online support resources and clear paths to seek help internally.

Our baseline goal is to ensure young people:

- Feel confident in themselves.
- Are able to express a range of emotions appropriately.
- Are able to make and maintain positive relationships with others.
- Cope with the stresses of everyday life, manage times of stress, and deal with change.
- Learn and achieve effectively.

7.2 Assessing Further Support Needs (The Graduated Approach)

When a pupil is identified as having a mental health need, the Senior Mental Health Lead implements a case-by-case, graduated approach using a 4-part cycle:

7.3 Internal Mental Health Interventions

Tailored internal interventions include:

- In-school Counselling and Pastoral Support. Sessions are structured to allow meaningful therapeutic time — typically around 40 minutes with additional time built in for notes and administration — in line with BACP (British Association for Counselling and Psychotherapy) ethical practice guidelines. Shorter check-in sessions of around 20 minutes may be used for lower-intensity support, ensuring our school counsellor's time is used thoughtfully and sustainably.
- Resilience Coaching.
- Access to a dedicated Respite Area.
- Implementation of Reduced Timetables (in line with the school's Part-Time Timetable Policy and DfE guidance on reduced timetables; note that LA scrutiny of this provision is increasing and all cases must be individually authorised and regularly reviewed).
- **CAMHS Core Meetings:** Professional consultations to support staff in managing the mental health needs of pupils.

7.4 Mental Health Records

- All medical/mental health records are securely held by our in-house Mental Health Practitioner.
- Pupil Passports can be held and logged under the Social, Emotional, and Mental Health (SEMH) tracker.
- Individual support is reviewed on a regular cycle — typically every 12 weeks — to ensure it remains purposeful and responsive to each young person's needs. Reviews draw on attendance, engagement, and wellbeing data and are discussed within the appropriate pastoral and inclusion team. This approach aligns with BACP guidance on planned endings and ethical review of therapeutic work, and ensures no pupil remains on a caseload without clear, active consideration of their progress.

7.5 External Referrals

If a pupil's needs cannot be met by the internal offer our school provides, we will initiate (or assist parents with) external referrals to:

- Their GP or a Paediatrician.
- CAMHS (Child and Adolescent Mental Health Services).
- **Charities & Digital Support:** Samaritans, Mind, Young Minds, and Kooth.
- **Local Services:** Local counselling provision (e.g., Youtherapy).

8. Supporting and Collaborating with Parents/Carers

We build strong support networks by actively engaging with families through the following commitments:

School Commitments	Parental Engagement & Practicalities
Communication	We ask parents to inform us of any external stressors, and we promise to communicate school concerns promptly.
Information	We update the school website with resources, copy policies, and share PSHE curriculum details to extend learning to the home.
Collaboration	We liaise directly to share coping strategies, guide families through local health services, and build Individual Healthcare Plans (IHPs) where needed.
Advocacy	We actively celebrate World Mental Health Day and Children's Mental Health Week to build community visibility.

Meeting Protocol

- Mental health concerns will be communicated **face-to-face** whenever possible.
- Meetings will be handled with sensitivity, ensuring parents are given time to reflect. Lines of communication will remain open.
- A record of what was discussed and the action plans agreed upon will be added directly to the pupil's confidential record.

9. Supporting Peers

Watching a friend experience poor mental health can be very challenging for pupils. They may also be at risk of learning and developing unhealthy coping mechanisms from each other. We offer case-by-case support to affected peers, including:

- Practical strategies they can use to support their friends.
- Things they should avoid doing or saying.
- Warning signs to look out for and flag to staff.
- Direct signposting to sources of external support.

10. Signposting

- Vetted support resources are permanently hosted on our school website so pupils and parents know how to get help.
- Referrals can be facilitated via the academy's Designated Safeguarding Persons (DSPs).
- The Senior Mental Health Lead remains available to guide families looking to learn more about available support.

11. Whole-School Approach to Awareness

11.1 PSHE Curriculum Delivery

We follow the **PSHE Association Guidance** for teaching mental health and emotional wellbeing. Pupils are taught to:

- Develop healthy coping strategies and understand their own emotional states.
- Challenge social misconceptions and stigma surrounding mental health.
- Keep themselves and others safe.
- *Extended Support:* Pupils have direct access to emotional wellbeing sessions after school every Tuesday.

11.2 Culture Building

Staff actively foster an open environment by discussing mental health issues with pupils to break down stigma and encouraging early disclosures when wellbeing deteriorates.

12. Training

All staff are provided with regular training opportunities to ensure they:

1. Have a good understanding of what pupils' mental health needs are.
2. Know how to recognise early warning signs of mental ill health.
3. Know the exact, clear process to follow if they identify a pupil in need of help.

13. Support for Staff

The school recognises that supporting a pupil experiencing poor mental health can heavily affect that staff member's own mental health and wellbeing. To support our workforce, we will:

- Treat all internal staff mental health concerns seriously.
- Create a pleasant, open, and supportive work environment.
- **Provide Structured Supervision Frameworks:**
  - *School Counsellor: 1.5 hours of supervision per month (as required by BACP standards for qualified counsellors) or line-management supervision; these serve different purposes and may need to be provided separately.*
  - *DSP / DDSL / DSL: 30-minute supervision sessions on a fortnightly basis, usually Friday afternoons. Where this conflicts with other commitments, an alternative slot will be arranged with the line manager within the same fortnight.*
- **External Support Pathways:** Signpost staff experiencing poor mental health to specialised support via the **Schools Advisory Service (SAS)**.

14. Monitoring and Review Arrangements

This policy is a live document and undergoes a mandatory annual review process.