

Coningsby St Michael's Primary School.



Believe. Aspire. Succeed

Mental Health and Emotional Wellbeing policy

Author	S Liley	Date: January 2020 Amended Nov 23 Amended Feb 2025
Checked by		PSM/SENDCO
Review frequency	Every 2 years.	

Next review due	March 2027
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School Vision

*As Jesus welcomes and values children, we at St Michael's **aspire** to welcome and value all members of our community. We **believe** that this welcome and value provides opportunities for all to **succeed**.*

Matthew 18: 2-5

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

(World Health Organization)

Emotional wellbeing is about being happy, confident, having good relationships and being able to cope with everyday events.

(Healthy Minds Lincolnshire)

At Coningsby St Michael's we are committed to supporting and promoting positive mental health and emotional wellbeing for our whole school community. We believe all children need the foundation of positive mental health to:

- fulfil their potential academically, socially, emotionally, spiritually, psychologically, creatively
- maintain good physical health
- initiate, develop and sustain mutually satisfying personal relationships
- become aware of others and empathise with them
- face challenges, resolve issues and setbacks and learn from them
- grow in confidence and benefit from all the opportunities available to them, well prepared for life beyond school

We aim to make a difference by providing a place where all children and adults feel safe and secure, where they are able to achieve and experience success.

We support and promote positive mental health and emotional wellbeing using a combination of curriculum learning, universal whole school approaches and specialised targeted approaches.

In addition to supporting and promoting positive mental health and emotional wellbeing, we aim to recognise and respond when concerns are raised about an individual's mental health or emotional wellbeing by:

- increasing pupil/staff understanding and awareness of common mental health issues
- providing information to staff/parents/carers about early warning signs which may indicate that a child is experiencing mental health issues
- providing guidance on how concerns raised about a pupil's mental health or emotional wellbeing will be managed by staff
- providing support to pupils who are experiencing emotional wellbeing issues

- providing support to pupils who are experiencing mental health issues through signposting and referral to outside agencies
- providing information to parents/carers on where to access support for mental health or emotional wellbeing issues

See Appendix 1 for information about common mental health illnesses

Lead Members of Staff

Whilst all staff have a responsibility to promote positive mental health and emotional wellbeing of pupils and colleagues, staff with a specific, relevant remit include:

- ♣ Designated safeguarding Lead (DSL) – Mrs S Liley, Mrs Eden, Miss Williams and Miss V Wise
- ♣ Pastoral Lead – Miss V Wise
- ♣ Special Educational Needs and Disability Co-ordinator (SENDCo) – Mrs B Louth
- ♣ Emotional Literacy Support Assistant (ELSA) – Miss N Williams
- ♣ Mental Health Lead – Miss N Williams
- ♣ Staff Wellbeing Champion – Miss N Williams
- ♣ First Aid Lead – Mrs T Phillips
- ♣ PSHE Lead – Mrs S Costello
- ♣ Wellbeing and Inclusion Leads: Miss N Williams

Supporting and Promoting Positive Mental Health and Emotional Wellbeing in School Curriculum Learning.

PSHE Curriculum Vision:

At Coningsby St Michael's, our PSHE and RSHE curriculum is rooted in our Christian ethos and the guiding values of *Aspire, Believe, Succeed*. We aim to nurture confident, compassionate, and responsible individuals who understand themselves and others, and who are equipped to thrive in a diverse and ever-changing world.

Guided by the LAAT Trust's principles of Excellence, Exploration, and Encouragement, our curriculum empowers every child to:

- Explore their identity, emotions, and relationships in a safe and inclusive environment.
- Excel in developing the skills needed to make informed choices, build healthy relationships, and contribute positively to society.
- Feel encouraged to express themselves, respect others, and stand up for what is right. We embed British Values—democracy, rule of law, individual liberty, mutual respect, and tolerance, through meaningful discussions, pupil voice, and active citizenship.

Our curriculum celebrates diversity and promotes equality by ensuring representation and understanding of the nine protected characteristics, fostering a culture of respect and inclusion. Children learn to be good citizens through opportunities to engage in community projects, leadership roles, and reflection on moral and ethical issues. We teach them to value themselves and others, to challenge discrimination, and to build a society rooted in fairness and kindness.

Our safeguarding curriculum ensures that children understand how to stay safe both physically, emotionally, and online. We provide age-appropriate education on online safety, consent, boundaries, and recognising unsafe situations, empowering pupils to protect themselves and seek help when needed.

Through PSHE and RSHE, children develop lifelong skills in:

- Self-awareness and emotional regulation
- Critical thinking and decision-making
- Empathy and respectful communication
- Resilience and personal responsibility.

We aspire for every child to leave Coningsby St Michael's with a strong sense of self, a deep respect for others, and the confidence to succeed as active, informed, and caring members of society.

Early warning signs which may indicate that a child is experiencing mental health issues

School staff may become aware of early warning signs which may indicate a child is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with our Mental Health Lead. Possible warning signs include:

- ♣ Physical signs of harm that are repeated or appear non-accidental
- ♣ Changes in eating/sleeping habits
- ♣ Increased isolation from friends or family, becoming socially withdrawn
- ♣ Changes in activity and mood
- ♣ Lowering of academic achievement
- ♣ Talking or joking about self-harm or suicide
- ♣ Expressing feelings of failure, uselessness or loss of hope
- ♣ Changes in clothing – e.g. long sleeves in warm weather
- ♣ Secretive behaviour
- ♣ Avoiding PE or getting changed secretly
- ♣ Lateness to or absence from school
- ♣ Repeated physical pain or nausea with no evident cause
- ♣ An increase in lateness or absenteeism

It should be noted that this list is not definitive and all members of staff must record any concerns that they have about a child on CPOMS and speak directly to Mental Health Lead/Pastoral Lead

Managing concerns raised about a pupil's mental health or emotional wellbeing

Any member of staff who is concerned about the mental health or emotional wellbeing of a pupil should speak to the Mental Health Lead/Pastoral Lead in the first instance, who will offer support and advice about next steps. The staff member must then record their concerns on the pupil record on CPOMS, providing details of what has occurred or been observed to raise the concern.

A pupil may choose to disclose concerns about themselves or a friend to any member of staff. If a pupil chooses to disclose concerns about their own mental health or that of a friend to a member of staff, the member of staff's response should always be calm, supportive and non-judgemental. Staff should listen, rather than advise and our first thoughts should be of the student's emotional and physical safety rather than of exploring 'Why?' All disclosures must be recorded on the pupil record on CPOMS.

This written record should include:

- ♣ Date the disclosure was made
- ♣ The name of the member of staff to whom the disclosure was made
- ♣ Main points from the conversation, including significant statements recorded verbatim
- ♣ Agreed next steps with pupil

This information should be shared with The Mental Health Lead/Pastoral Lead who will offer support and advice about next steps.

If there is a concern that a child is in immediate harm or there are identified underlying child protection concerns, then the normal safeguarding procedures should be followed with an immediate referral to the Designated Safeguarding Lead.

If the child presents a medical emergency then the normal procedures for medical emergencies should be followed.

Confidentiality

We should be honest with regards to the issue of confidentiality. If it is necessary for us to share our concerns about a pupil then we should discuss with the pupil:

- ♣ Who we are going to talk to
- ♣ What we are going to tell them
- ♣ Why we need to tell them

We should discuss with the pupil how information will be shared with their parent/ carer. Pupils may choose to tell their parents themselves. We should always give pupils the option of school staff informing parents for them or with them.

Support for pupils

The Mental Health Lead/Pastoral Lead, working in partnership with the pupil, parents/carers and school staff (as deemed appropriate) can advise or offer support to the pupil through universal whole school approaches or specialised targeted approaches. The support offered to the pupil will be determined by a number of factors including: the nature of the concern, the frequency of the concern, the possible impact on the child's mental health or emotional wellbeing, the type of support sought by the pupil and the type of support to which the parent consents.

Universal Whole School Approaches include:

- Displaying information in school about where pupils can access support
- Highlighting to pupils during teaching how they can access support both in school, at home and in the local community
- Informal conversations – pupils can share their worries with a member of staff through informal conversations during the school day

- Circle time – pupils can share their worries with their peers and class teacher and have an opportunity to discuss them
- Class **whisper** box – pupils can share their worries with their class teacher and have an opportunity to discuss them
- ELSA drop-in – pupils can request to speak directly with our school ELSA to share their worries and have an opportunity to discuss them
- The **5 Point Scale** is used across our school to help children recognise, understand and regulate their emotions. By breaking feelings into five clear, manageable steps, pupils can identify how they are feeling and choose appropriate strategies to help them return to a calm, ready to learn state. This supports consistency, emotional literacy and positive self-regulation for all learners.

Specialised Targeted Approaches include:

- Social/ Emotional Skills group – teaching assistants may deliver a programme of emotional/social skills to a specific group of pupils
- ELSA support – pupils can have a number of sessions led by our school ELSA. These may be individual or group sessions to specifically support the pupil with an identified area of concern in relation to their emotional literacy or emotional wellbeing
- Referral to Child and Young Persons Counselling Service (CASYS) – pupils can have a number of sessions during school
- Consultation/ referral to Healthy Minds Lincolnshire
- Consultation/ referral to Educational Psychology
- Consultation/ referral to Child and Adolescent Mental Health Services (CAMHS)
- Consultation/ referral to other outside agencies as identified appropriate, for example bereavement support services, self-harm support services
- SDQ (Social Difficulties Questionnaire)
- Measuring Emotional and Psychological Wellbeing through the Stirling Children's Wellbeing Scale (pupils aged 8 years or over)

Working with Parents/Carers

The school will aim to work closely with all parents/ carers to support their child.

Parents are often very welcoming of support and information from the school about supporting their children's emotional and mental health needs. Working closely with parents/carers includes:

- Contacting parents/carers to advise and discuss concerns raised about the mental health or emotional wellbeing of their child (following Safeguarding procedures where necessary)
- Signposting parents/ carers to sources of information and support for mental health and emotional wellbeing issues for their children or when necessary, for themselves
- Ensuring that parents/carers are aware of who to talk to if they have concerns about their own child or a friend of their child
- Involving parents/carers in making a plan to support their child and reviewing any intervention/ support plan on a regular basis

See Appendix 3 - Information on national and local support for mental health & emotional wellbeing and how to access support services

Support for School Staff

At Coningsby St Michael's we are committed to ensuring all members of staff have a healthy balance of family, work, rest and leisure in their life. In addition we strive to ensure staff do not feel unduly anxious, insecure or lacking in confidence in their working lives. We have a staff wellbeing statement in place from Lincoln Anglican Academy Trust to support and promote mental health and emotional wellbeing for all staff in school. Our Staff Wellbeing Champion organises regular activities and events to promote staff happiness, to make staff feel valued and cared for and to build upon positive working relationships. Staff have access to ViV Up Services, open door with SLT and Mental Health Lead.

Training

All staff will receive training about recognising and responding to mental health issues as part of their regular child protection training and this is reviewed on a regular basis. Training is also provided through Flick and Viv Up Services.

The MindEd learning portal provides free online training suitable for staff wishing to know more about a specific issue.

Appendix 1 - Information about common mental health illnesses

1. Mental Health Statistics (NHS, 2023)

- **Prevalence**
- **1 in 5 children and young people (20%) aged 8–25** had a *probable mental disorder* in 2023.
[\[england.nhs.uk\]](https://www.england.nhs.uk)
- For **8–16 year olds**, 20.3% had a probable mental disorder.
- For **17–19 year olds**, this rose to **23.3%**, and **21.7%** for 20–25 year olds.
[\[digital.nhs.uk\]](https://www.digital.nhs.uk)
- **Trends Over Time**
- Prevalence **rose between 2017 and 2020**, and has since **remained at similar levels** through 2022 and 2023.
[\[digital.nhs.uk\]](https://www.digital.nhs.uk)
- **Types of Difficulties**
- Emotional disorders continue to be **the most common**, consistent with earlier survey patterns.
- **Eating disorders have risen sharply** since 2017—
 - 12.5% of 17–19 year olds had an eating disorder in 2023 (vs. 0.8% in 2017).
[\[england.nhs.uk\]](https://www.england.nhs.uk)
- **Gender Differences**
- Among older teens and young adults, **young women are twice as likely** as young men to have a probable mental disorder.
[\[digital.nhs.uk\]](https://www.digital.nhs.uk)
- **Impact Factors**
Children and young people with a probable mental disorder were significantly more likely to experience:
 - **Financial barriers** (e.g., unable to take part in activities).
 - **Higher rates of bullying** (36.9% vs 7.6% for in-person bullying).
[\[digital.nhs.uk\]](https://www.digital.nhs.uk)

This reflects a large and sustained increase in prevalence since 2017 — particularly in emotional disorders and eating disorders.

Mental health conditions that are known to affect children and young people include:

Anxiety, stress, worry, panic attacks, phobias - Anxiety can take many forms in children and young people, and it is something that each of us experiences at low levels as part of normal life. When thoughts of anxiety, fear or panic are repeatedly present over several weeks or

months and/or they are beginning to impact on a young person's ability to access or enjoy day-to-day life, intervention is needed.

Low mood and depression - Ups and downs are a normal part of life for all of us, but for someone who is suffering from depression these ups and downs may be more extreme. Feelings of failure, hopelessness, numbness or sadness may invade their day-to-day life over an extended period of weeks or months, and have a significant impact on their behaviour and ability and motivation to engage in day-to-day activities.

Obsessive Compulsive Disorder - Obsessions describe intrusive thoughts or feelings that enter our minds which are disturbing or upsetting; compulsions are the behaviours we carry out in order to manage those thoughts or feelings. For example, a young person may be constantly worried that their house will burn down if they don't turn off all switches before leaving the house. They may respond to these thoughts by repeatedly checking switches, perhaps returning home several times to do so.

Obsessive compulsive disorder (OCD) can take many forms – it is not just about cleaning and checking.

Eating concerns or disorders - Food, weight and shape may be used as a way of coping with, or communicating about, difficult thoughts, feelings and behaviours that a young person experiences day to day. Some young people develop eating disorders such as anorexia (where food intake is restricted), binge eating disorder and bulimia nervosa (a cycle of bingeing and purging). Other young people, particularly those of primary or preschool age, may develop problematic behaviours around food including refusing to eat in certain situations or with certain people. This can be a way of communicating messages the child does not have the words to convey.

Trauma - Trauma happens in both big and little moments in life that are so overwhelming that you struggle to cope or makes sense of what has happened. When someone reacts after a traumatic event this is a normal response to a 'not normal' situation. It is very common to experience distress after a traumatic incident and often people can experience a wide range of intense emotions such as shame, anger, fear and anxiety, guilt, sadness, helplessness or even embarrassment. Sometimes people might not 'feel' anything at all and instead describe being numb, disconnected or stunned. Trauma can affect the way we think too and we can feel out of control of what is happening in our minds, including constantly thinking about the event, having images of what happened come into our minds, having nightmares, and trying to problem solve future events or situations to keep ourselves safe. We also might start to behave differently such as withdrawing from things we used to enjoy, not wanting to talk to anyone, feeling overly alert or 'on edge' and so being more watchful or attentive to other people or our surroundings, or changes in sleep and appetite. Concentrating on tasks or conversations can also be difficult.

Self-harm - Self-harm describes any behaviour where a young person causes harm to themselves in order to cope with thoughts, feelings or experiences they are not able to

manage in any other way. It most frequently takes the form of cutting, burning or non-lethal overdoses in adolescents, while younger children and young people with special needs are more likely to pick or scratch at wounds, pull out their hair or bang or bruise themselves.

Suicidal thoughts - Young people may experience complicated thoughts and feelings about wanting to end their own lives. Some young people never act on these feelings though they may openly discuss and explore them, while other young people die suddenly from suicide apparently out of the blue.

After reading the information on this page, you feel that you or your child needs more help, see Appendix 3 for details of how to access help and support or contact your GP.

Appendix 3 - Information on national and local support for mental health & emotional wellbeing and how to access support services

National Support:

MIND: www.mind.org.uk

Young Minds: www.youngminds.org.uk

Anxiety UK: www.anxietyuk.org.uk

Depression Alliance: www.depressionalliance.org

OCD UK: www.ocduk.org

Beat Eating Disorders Charity: www.beateatingdisorders.org.uk

Action For Happiness: www.actionforhappiness.org

Childline: 0800 11 11 www.childline.org.uk

NSPCC: 0808 800 5000 www.nspcc.org.uk

Kooth.com - Free, safe and anonymous online support for young people: www.kooth.com

To access National Support services use the contact details above and follow the website information, advice and contact details.

Local Support:

Lincolnshire Partnership NHS Foundation Trust (LPFT): www.lpft.nhs.uk LPFT provides a range of information and services that can help you and/or your child/young person get the help they need, from self-help information to local emotional wellbeing services in schools and specialist mental health services including:

- **Self-help Information** – providing clear, straightforward information about issues you may be struggling with, as well as advice on how to improve your health and wellbeing, information on what impacts on emotional wellbeing, tips for looking after yourself and self-help guidance on what you can do. Follow the online prompts to access the information.
- **Healthy Minds Lincolnshire** – provides emotional wellbeing support for children and young people up to 19 years old. If you have a special educational need or disability or are a care leaver they can see you up to the age of 25. Healthy Minds can help with:
 - ♣ Exam stress
 - ♣ Worries
 - ♣ Bullying
 - ♣ Relationship difficulties
 - ♣ Self-harm
 - ♣ Low mood
 - ♣ Low self-confidence
 - ♣ Low body image

Referral to Healthy Minds Lincolnshire – the first step is usually to speak to your GP, child's school (Mental Health Lead) or any other professional in your life. You can self-refer using the Here4You line on **01522 309777** Mon – Fri: 09.30 -16.30. Parents/ carers and children over 13 years old can phone the Duty Advice Line.

- **Child and Adolescent Mental Health Service (CAMHS)** – supports young people aged 0-18 (or up to 24 if you have been in the care system) who are experiencing mental health difficulties and are finding it hard to cope with everyday life. CAMHS will see young people with many different types of mental health difficulties such as:
 - ♣ Low mood and Depression
 - ♣ Anxiety, including phobia's and obsessive thoughts and behaviours
 - ♣ Post-Traumatic Stress Disorder
 - ♣ Self-harm and thoughts of suicide
 - ♣ Eating disorders, including anorexia and bulimia

Referral to CAMHS – the first step is usually to speak to your GP, child’s school (Mental Health Lead) or any other professional in your life. Parents/carers (with Parental Responsibility) and young people can refer using the Here4You line on **01522 309120** Mon – Fri: 09.03 -16.30.

Family Services Directory and Local Offer Lincolnshire (FSD): <https://lincolnshire.fsd.org.uk>

FSD want to make sure that young people have access to information and advice in one place, and are aware of local services, that can help support them when experiencing emotional wellbeing, mental health or behavioural concerns. The information provided within this pathway is also designed to help families of children and young people experiencing emotional wellbeing, mental health or behaviour concerns and the professionals working with them. The pathway aims to provide children and young people, and their families, with better access to the right support at the right time.

Connect to Support Lincolnshire: <https://lincolnshire.connecttosupport.org> Provides information and advice relating to Adult Care and Community Wellbeing for Lincolnshire.