

Kingsmead School & Sixth Form

Social, Emotional, Mental Health and Wellbeing Policy



This plan is reviewed annually in the autumn term.

Next Review Due: Nov 2026

History of Document:

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I. **Statement of Intent**

This policy outlines the framework for Kingsmead School to meet its duty in providing and ensuring a high quality of education to all of its pupils, including pupils with social, emotional, and mental health (SEMH) needs, and to do everything it can to meet the needs of pupils with SEMH needs.

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

- Promote a positive outlook regarding pupils with SEMH needs.
- Eliminate prejudice towards pupils with SEMH needs.
- Promote equal opportunities for pupils with SEMH needs.
- Ensure all pupils with SEMH needs are identified and appropriately supported – minimising the risk of SEMH needs escalating into physical harm.
- Provide guidance to school staff on our school's approach to promoting SEMH across all communities in the school.
- Inform pupils and parents about the support that they can expect from the school in respect of supporting SEMH.
- Foster a positive atmosphere in school, where pupils feel able to discuss and reflect on their own experiences with mental health openly.
- Create a culture of wellbeing and inclusion.
- Celebrate all of the ways pupils achieve at our school, both inside and outside the classroom.
- Allow pupils to participate in forming our approach to SEMH by promoting pupil voice.
- Give pupils the opportunity to develop their self-esteem by taking responsibility for themselves and others.
- Spread awareness of the varieties of ways SEMH issues can manifest.
- Support staff to identify and respond to early warning signs of SEMH issues.
- Provide support to staff working with pupils with SEMH issues.
- Provide support and access to resources to pupils experiencing mental ill health alongside their peers, their families and the staff who work with them.

We will work with the Local Authority with regards to the following:

- The involvement of pupils and their parents in decision-making.
- The early identification of pupils' needs.
- Collaboration between education, health, and social care services to provide support when required.
- Greater choice and control for pupils and their parents over their support

This policy has been written in consultation with the senior leadership team, safeguarding team, pastoral team, trustees, pupils, and parents.

This policy should be read in conjunction with:

- [SEND policy](#)
- [Behaviour policy](#)
- [Child on child abuse policy](#)
- [Safeguarding policy](#)
- [Attendance policy](#)

2. Legal framework

This policy was written with regard to the following legislation:

- [The Equality Act 2010](#)
- [The Data Protection Act 2018](#)
- Articles 3 and 23 of the [UN Convention on the Rights of the Child](#)
- [Children and Families Act 2014](#)
- [Health and Social Care Act 2012](#)
- [Education Act 2002](#)
- [Mental Capacity Act 2005](#)
- [Children Act 1989](#)

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

- [DfE \(2024\) 'Keeping children safe in education'](#)
- [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'](#)

3. Roles and responsibilities

All staff are responsible for promoting positive mental health and wellbeing across the school and for understanding risk factors. If any members of staff are concerned about a pupil's mental health or wellbeing, they should inform the Designated Safeguarding Lead (DSL) via the Child Protection Management System (CPOMS) or the Safeguarding mobile (07514 500041).

Certain members of staff have extra duties to lead on SEMH in school.

The Headteacher is responsible for:

- Ensuring that those teaching or working with pupils with SEMH needs are aware of their needs and have arrangements in place to meet them.
- Ensuring that teachers monitor and review pupils' academic and emotional progress during the course of the academic year.
- Ensuring that the SENCO has sufficient time and resources to carry out their functions, in a similar way to other important strategic roles within the school.
- On an annual basis, carefully reviewing the quality of teaching for pupils at risk of underachievement, as a core part of the school's performance management arrangements.
- Ensuring that staff members understand the strategies used to identify and support pupils with SEMH needs.
- Ensuring that procedures and policies for the day-to-day running of the school do not directly or indirectly discriminate against pupils with SEMH needs.
- Consulting health and social care professionals, pupils, and parents to ensure the needs of pupils with SEMH needs are effectively supported.
- Keeping parents and relevant staff up to date with any changes or concerns involving pupils with SEMH needs.
- Ensuring staff members have a good understanding of the mental health support services that are available in their local area, both through the NHS and voluntary sector organisations.
- Establishing and maintaining a culture of high expectations and including pupils with SEMH needs in all opportunities that are available to other pupils.

The Designated Safeguarding Lead, Deputy Designated Safeguarding lead and Safeguarding Officer and Mental Health Lead are 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.
- Collaborating with the SENCO, Headteacher and Trustee board, as part of the SLT, to outline and strategically develop SEMH policies and provisions for the school.
- Coordinating with the SENCO and mental health support teams to provide a high standard of care to pupils who have SEMH needs.
- Advising on the deployment of the school's budget and other resources in order to effectively meet the needs of pupils with SEMH needs.
- Being a key point of contact with external agencies, especially the mental health support services, the LA, LA support services and mental health support teams.
- Providing professional guidance to colleagues about mental health and working closely with staff members, parents, and other agencies, including SEMH charities.
- Referring pupils with SEMH needs 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.
- Overseeing the mentoring programme with both external and internal mentors and its impact

- Liaising with parents of pupils with SEMH needs, 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.

The Special Educational Needs Co-Ordinator (SENCO) is responsible for:

- Collaborating with the Trustee board, Headteacher and the mental health lead, to determine the strategic development of SEMH policies and provisions in the school.
- Undertaking day-to-day responsibilities for the successful operation of the SEMH Policy.
- Supporting the subject teachers in the further assessment of a pupil's particular strengths and areas for improvement and advising on the effective implementation of support.

Teaching staff are responsible for:

- Being aware of the signs of SEMH needs.
- Planning and reviewing support for their pupils with SEMH needs 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 there are no barriers to every pupil achieving their full potential, and that every pupil with SEMH needs will be able to study the full national curriculum.
- Being responsible and accountable for the progress and development of the pupils in their class.
- Being aware of the needs, outcomes sought, and support provided to any pupils with SEMH needs.
- Keeping the relevant figures of authority up to date with any changes in behaviour, academic developments and causes of concern. The relevant figures of authority include SENCO/Headteacher/subject leader.

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.

4. Staff training

The SLT ensures that all teachers have a clear understanding of the needs of all pupils, including those with SEMH needs.

The SLT 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 to escalate issues through clear referral and accountability systems.

Staff receive training to ensure they:

- Can recognise common suicide risk factors and warning signs.
- Know the students who are particularly vulnerable to SEMH needs.
- Understand what to do if they have concerns about a pupil demonstrating suicidal behaviour.
- Know and feel confident to manage conversations with pupils about self-harm and suicide.
- Know what support is available for pupils and how to refer pupils to such support where needed.

5. Vulnerable groups

Some pupils are particularly vulnerable to SEMH issues. 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 needs in pupils in vulnerable groups and remain vigilant to early signs of needs.

Vulnerable groups include the following:

- Pupils who have experienced abuse, neglect, exploitation, or other adverse contextual circumstances
- Children in need
- LAC
- Previously LAC (PLAC)
- SEND
- 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.

6. 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 needs, these are known as risk factors.

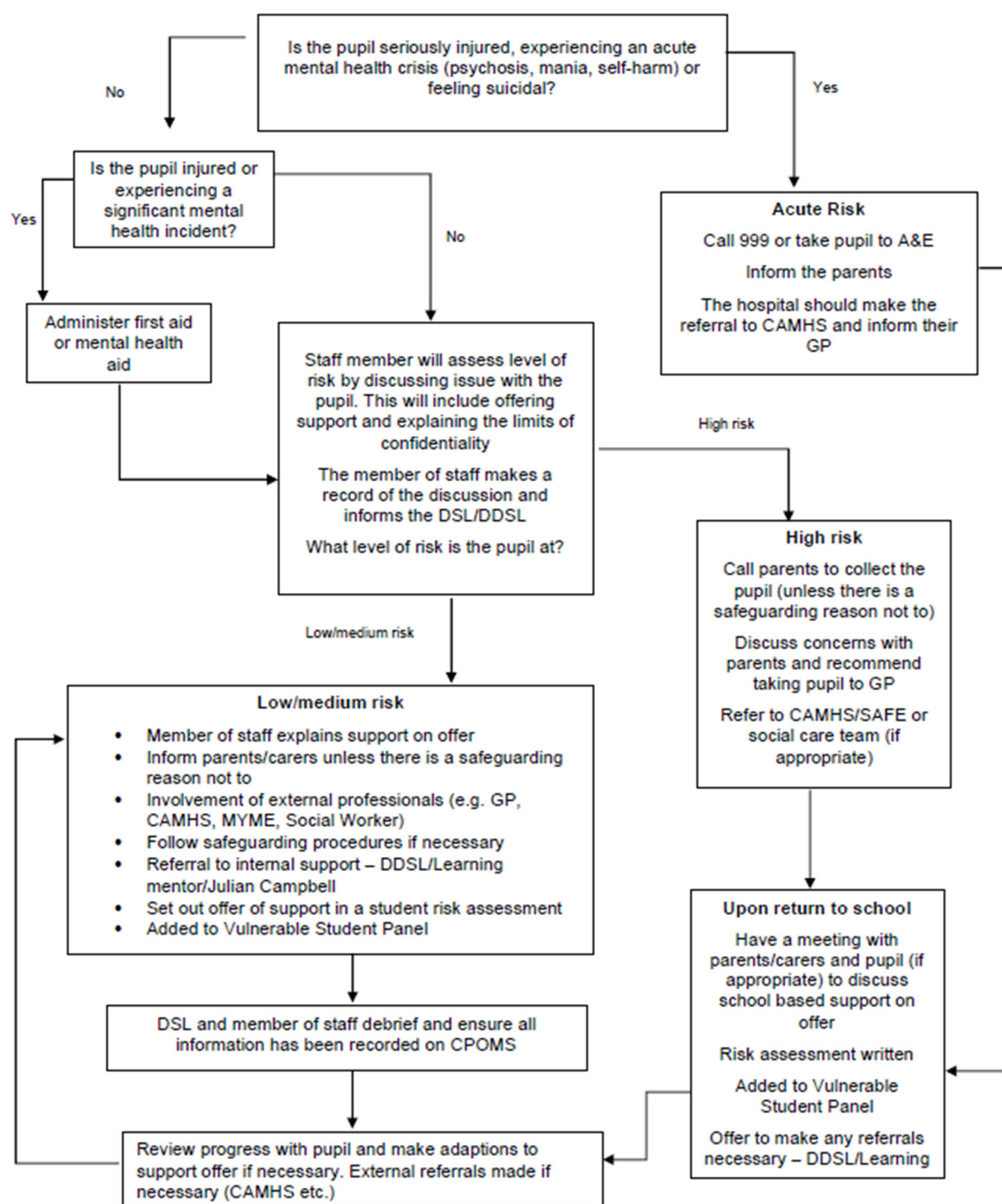
There are also factors associated with a decreased likelihood of SEMH needs, these are known as protective factors.

The table below displays common risk factors for SEMH needs (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	• Genetic influences • Low IQ and learning disabilities. • Specific development delay or neuro-diversity • Communication difficulties • Difficult temperament • Physical illness • Academic failure • Low self-esteem	• 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	• 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	• 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	• Bullying including online (cyber bullying) • Discrimination • Breakdown in or lack of positive friendships • Deviant peer influences • Peer pressure • Peer-on-peer abuse • Poor pupil-to-teacher/school staff relationships	• Clear policies on behaviour and bullying • Staff behaviour policy (also known as code of conduct) • 'Open door' policy for children to raise problems. • 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	• 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	• 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
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7. Procedure to follow in a case of acute mental health crisis



8. **Warning signs**

All staff will be on the lookout for signs that a pupil's mental health is deteriorating. Some warning signs include:

- Changes in mood or energy level.
- Changes in eating or sleeping patterns.
- Changes in attitude in lessons or academic attainment.
- Changes in level of personal hygiene.
- Social isolation.
- Poor attendance or punctuality.
- Expressing feelings of hopelessness, anxiety, worthlessness or feeling like a failure.
- Abuse of drugs or alcohol.
- Weight loss or gain.
- Secretive behaviour.
- Covering parts of the body that they wouldn't have previously.
- Refusing to participate in P.E. or being secretive when changing clothes.
- Physical pain or nausea with no obvious cause.
- Physical injuries that appear to be self-inflicted.
- Talking or joking about self-harm or suicide.

9. **Managing disclosures**

If a pupil makes a disclosure about themselves or a peer to a member of staff, staff should remain calm, non-judgmental, and reassuring.

Staff will focus on the pupil's emotional and physical safety, rather than trying to find out why they are feeling that way or offering advice.

Staff will always follow the school's safeguarding policy and pass on all concerns to the Designated Safeguarding Lead. All disclosures are recorded on CPOMS.

Staff have access to the Safeguarding and Child Protection Handbook which details step by step actions to take in response to SEMH disclosures and incidents.

10. **Confidentiality**

Staff should not promise a pupil that they will keep a disclosure secret, instead they will be upfront about the limits of confidentiality.

A disclosure cannot be kept secret because:

- Other staff members can share ideas on how to best support the pupil in question.

- Being the sole person responsible for a pupil's mental health could have a negative impact on the member of staff's own mental wellbeing.
- The support put in place for the pupil will be dependent on the member of staff being at school.

Staff should always share disclosures with the Designated Safeguarding Lead. If information needs to be shared with other members of staff or external professionals, it will be done on a need-to-know basis.

Before sharing information disclosed by a pupil with a third party, the member of staff will discuss it with the pupil and explain:

- Who they will share the information with.
- What information they will share.
- Why they need to share that information.

Staff will attempt to receive consent from the pupil to share their information, but the safety of the pupil comes first.

Parents will be informed unless there is a child protection concern. In this case the Safeguarding policy will be followed.

11. Supporting pupils

11.1 Baseline support for all pupils

As part of the school's commitment to promoting positive mental health and wellbeing for all pupils, the school offers support to all pupils by:

- Raising awareness of mental health during assemblies, Character Curriculum, Drop Down Days.
- Signposting pupils to sources of online support (Kooth, Childline, Young Minds).
- Having open discussions about mental health during lessons.
- Working alongside pupils to provide them avenues to feedback on elements of the school that is negatively impacting their mental health.
- Use assessment tools to monitor student mental health e.g., Boxhall Profile, Strengths, and Difficulties Questionnaire (SDQ).
- Appointing a Senior Mental Health Lead with a strategic oversight of the whole school approach to mental health and wellbeing.
- Pastoral support.

1.1 Assessing what further support is needed.

If a pupil is identified as having a mental health need, the Safeguarding team will take a graduated and case-by-case approach to making an assessment and providing tailored support, further to the provision of the baseline support.

The school will offer support in cycles of:

- Assessing what the pupil's mental health needs are.
- Creating a plan to provide support.
- Taking the actions set out in the plan.
- Reviewing the effectiveness of the support offered.

11.2 Internal mental health interventions

Where appropriate, a pupil will be offered support that is tailored to their needs as part of the graduated approach detailed above.

The support offered at our school includes:

- 1:1 mentoring (internal/external).
- 1:1 Learning mentor.
- Small group interventions.
- Reduced timetable/flexi timetable.
- School based family meetings.
- Team around the family meetings.
- Time out cards.

11.3 Making external referrals

If a pupil's needs cannot be met by the internal offer the school provides, the school will make, or encourage parents to make, a referral for external support.

A pupil could be referred to:

- GP or paediatrician
- CAMHS
- Mental health charities (e.g. [Samaritans](#), [Mind](#), [Young Minds](#), [Kooth](#))
- Local counselling services

12. Supporting and collaborating with parents and carers

We will work with parents and carers to support pupils' mental health by:

- Asking parents/carers to inform us of any mental health needs their child is experiencing, so we can offer the right support.
- Informing parents/carers of mental health concerns that we have about their child.
- Engaging with parents/carers to understand their mental health and wellbeing issues, as well as that of their child, and support them accordingly to make sure there is holistic support for them and their child.

- Highlighting sources of information and support about mental health and wellbeing on our school website, including the Social, Emotional, Mental Health and Wellbeing Policy.
- Liaising with parents/carers to discuss strategies that can help promote positive mental health in their child.
- Providing guidance to parents/carers on navigating and accessing relevant local mental health services or other sources of support (e.g., parent forums)
- Keeping parents/carers informed about the mental health topics their child is learning about in Character Curriculum and share ideas for extending and exploring this learning at home.

When informing parents about any mental health concerns we have about their child, we will endeavour to do this face to face.

These meetings can be difficult, so the school will ensure that parents are given time to reflect on what has been discussed, and that lines of communication are kept open at the end of the meeting.

A record of what was discussed, and action plans agreed upon in the meeting will be recorded and added to the pupil's confidential record.

If appropriate, a student care plan will be created in collaboration with parents/carers (see section 10.4).

13. Supporting peers

Watching a friend experience poor mental health can be extremely challenging for pupils. Pupils may also be at risk of learning and developing unhealthy coping mechanisms from each other.

We will offer support to all pupils impacted by mental health directly and indirectly. We will review the support offered on a case-by-case basis. Support might include:

- Strategies they can use to support their friends.
- Things they should avoid doing/saying.
- Warning signs to look out for.
- Signposting to sources of external support.

14. Whole school approach to promoting mental health awareness

14.1 Mental health is taught as part of Character Curriculum

We will follow the [PSHE Association Guidance teaching mental health and emotional wellbeing](#).

Pupils will be taught to:

- Develop healthy coping strategies.
- Challenge misconceptions around mental health.
- Understand their own emotional state.
- Keep themselves safe.

14.1 Creating a positive atmosphere around mental health

Staff will create an open culture around mental health by:

- Discussing mental health with pupils in order to break down stigma.
- Encouraging pupils to disclose when they think their mental health is deteriorating.
- Teaching about mental health in all subject disciplines.

15. **Monitoring arrangements**

This policy will be reviewed annually by the Assistant Headteacher for Inclusion. The Policy will be ratified by the Trustees after each annual review.