



West View Primary School

Mental Health and Wellbeing Policy

Policy approved by Local Academy Committee: March 2025
Date for Review: March 2026

‘Mental Health is defined as a state of well-being in which every individual recognises his or her own potential, can cope with the normal stress of life, can work productively and fruitfully, and is able to make a contribution to his or her own community’ (World Health Organisation; WHO 2014)

Our vision is for every member of our school community to:

☆ Dream Big. Aim High. Shine Bright. ☆

We know that in order to realise this vision, our pupils need to be first and foremost, physically, emotionally and mentally well. Therefore, at West View Primary School, we are committed to promoting positive mental health for all pupils. We do this by being proactive, implementing a curriculum which will help pupils to understand and regulate their emotions and have a good understanding of what keeps them healthy. In addition to promoting positive mental health, we aim to recognise and respond to mental ill health. By implementing practical, relevant and effective mental health procedures, and by providing targeted support in a timely manner, we can promote an emotionally and physically safe environment so that every pupil can *Dream Big. Aim High. Shine Bright.*

We will ensure that we are fulfilling our statutory duty to *‘promote children’s welfare and prevent concerns from escalating,’ ‘preventing the impairment of children’s mental and physical health or development’* (Keeping Children Safe in Education).

Aims

- Promote positive mental health and emotional wellbeing for all pupils
- Develop resilience amongst pupils and raise awareness of resilience through a whole school approach
- Increase understanding and awareness of common mental health issues so that staff and pupils can take quick and effective action
- Create an awareness of how to take a graduated response to mental health issues

A Whole School Approach

This policy is shaped around the Public Health England 8-point model: *Promoting children and young people’s mental health and wellbeing, A whole school or college approach document*. The policy also includes guidance from the Mental Health and Behaviour in Schools document (DFE 2018).

Figure 2 - Eight principles to promoting a whole school or college approach to mental health and wellbeing.



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 \(legislation.gov.uk\)](#)
- [Health and Social Care Act 2012 \(legislation.gov.uk\)](#)
- [Equality Act 2010 \(legislation.gov.uk\)](#)
- [Education Act 2002 \(legislation.gov.uk\)](#)
- [Mental Capacity Act 2005 \(legislation.gov.uk\)](#)
- [Children Act 1989 \(legislation.gov.uk\)](#)

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

- [Keeping children safe in education - GOV.UK \(www.gov.uk\)](#)
- [Mental health and behaviour in schools - GOV.UK \(www.gov.uk\)](#)
- [Counselling in schools - GOV.UK \(www.gov.uk\)](#)
- [SEND code of practice: 0 to 25 years - GOV.UK \(www.gov.uk\)](#)
- [Promoting children and young people's mental health and wellbeing \(publishing.service.gov.uk\)](#)

This policy also has due regard to the following school document and policies including, but not limited to, the following:

- Administering Medicines Policy
- Anti-Bullying Policy
- Attendance and Punctuality Policy
- Behaviour Policy
- Bereavement Policy
- Equality and Information Objectives
- Looked After Children Policy
- Mental Health and Wellbeing (Staff - Trust Policy)
- PREVENT Policy
- Pupil Premium Statement
- PSHE Policy
- Safeguarding and Child Protection Policy
- SEND Policy/SEND Information Report
- Staff Behaviour Policy
- Supporting Pupils with Medical Conditions Policy
- Young Carers Policy

Staff Roles and Responsibilities

All staff at West View Primary School have a responsibility to promote positive mental health and wellbeing. All members of staff must look out for early warning signs of mental health difficulties and ensure that pupils with mental health needs are provided with the support that they need. When appropriate, all staff are expected to liaise with, and make referrals to, key members of staff who have the following specific roles:

Headteacher/Designated Safeguarding Lead/Designated Teacher for LAC/Senior Mental Health Lead: Miss L. Furness
Inclusion Manager/Senior Mental Health Lead: Ms M. Clarke
PSHE Curriculum Lead/ Healthy Schools Lead: Mrs A. Chaffey
Special Educational Needs and Disabilities Co-ordinator (SENDCO): Mrs N. Boagey
Emotional Literacy Support Assistants: Mrs L. Brown and Miss S. Stokell
Link Local Academy Committee Member for Safeguarding/Mental Health and Wellbeing: Mr D. Wise

If any member of staff is concerned about the mental health of another pupil, they should discuss this with one of the above-named members of staff. If there is a concern that the pupil is in imminent danger or harm, safeguarding procedures should be followed and the Designated Safeguarding Lead, or a deputy, should be notified. If the pupil is presenting as needing immediate medical care, relevant first aid procedures should be followed, including involving the emergency services, where necessary.

As a school, we also have staff who have accessed specific training for Mental Health Responding and Mental Health First Aid through St John Ambulance - as set out below:

Ms M. Clarke	L3 Mental Health First Aider	26.10.22
Miss L. Furness	L3 Mental Health First Aider	26.10.22
Ms N. Boagey	L2 Mental Health Responder	28.02.23
Mrs R. Evans	L2 Mental Health Responder	28.02.23
Mr L. Smith	L2 Mental Health Responder	19.01.23
Miss K. Tailford	L2 Mental Health Responder	19.01.23
Miss N. Billyard	L2 Mental Health Responder	28.11.24
Mrs L. Brown	L2 Mental Health Responder	28.11.24
Mrs A. Chaffey	L2 Mental Health Responder	28.01.25
Mrs K. Taylor	L2 Mental Health Responder	28.01.25

Training will be refreshed every three years.

Curriculum

At West View Primary School, we will deliver a curriculum which will help pupils to understand and regulate their emotions and develop a good understanding of what keeps them physically, emotionally and mentally healthy. They will also learn about the importance of sleep, exercise and eating healthily, how to understand and manage emotions and how to access support as part of developing resilience.



At West View Primary School, we adopt the myHappymind programme which is grounded in science and dedicated to building positive mental wellbeing. myHappymind helps children from Pre-Nursery through to Year 6 to understand how their brains work and creates a culture that helps to build children's resilience, confidence and self-esteem. It also teaches children how to self-regulate and manage their emotions in stressful times, allowing them to be their very best selves!

This programme covers all of the mandatory objectives from the [Relationships education \(Primary\)](#) curriculum and around 70% of the PSHE objectives.

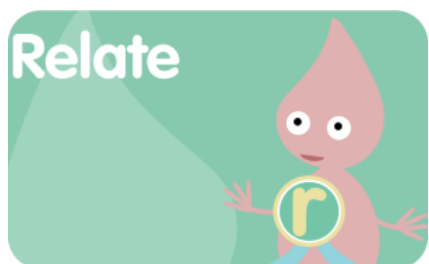
myHappymind comprises of 5 modules, as set out below:

Meet Your Brain: *Understanding how your brain works and how to ensure we look after it so that we can manage our emotions and be at our best. Growth mindset is a key part of this too.*



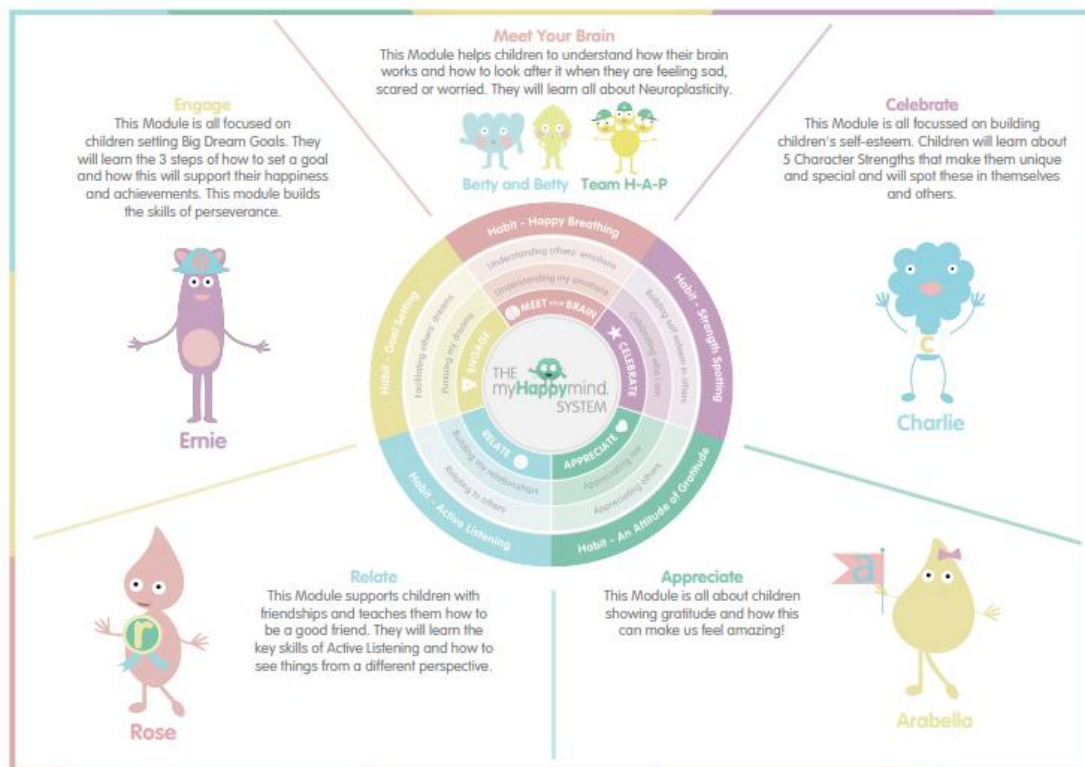
Celebrate: *Understanding your unique character strengths and learning to celebrate them. This is a fantastic module for building self-esteem.*

Appreciate: *Understanding why gratitude matters and how you can develop an 'attitude of gratitude' as a habit. Gratitude is key to wellbeing and resilience.*



Relate: *Understanding why positive relationships matter and how to build them.*

Engage: Understanding how to set meaningful goals that matter and how to keep resilient in times of challenges. This module is all about building self-esteem and resilience too.



As part of the myHappyMind programme, we also have a dedicated pupil group of Happiness Heroes. This group is led by Ms Clarke, our Senior Mental Health Lead.

As well as curriculum opportunities, we will use the assembly programme and social media to promote good mental health, resilience and raise awareness of what is available to pupils and parents/carers to support their own wellbeing. We believe that personal development is at the heart of resilience and confidence, therefore we will ensure that pupils are encouraged to be involved in a wide range of personal development opportunities and projects.

Ethos and Environment

All staff will ensure that the welfare and safety of pupils are a priority and will make reasonable adjustments to the environment for pupils who may be struggling with their mental health, enabling them to succeed socially, emotionally and academically. This includes the development of dedicated 'break out' spaces for children to use to calm, self-regulate or just to use to take time out where needed.

Schools should be a safe and affirming place for pupils where they can develop a sense of belonging and talk openly about mental health. At West View Primary School, we will create an environment which prevents and tackles bullying, removes stigma and establishes high expectations for staff and pupil behaviour.

Risk/Protective Factors

All staff have a responsibility to promote positive mental health and to understand the protective and risk factors which are believed to be associated with mental health outcomes - as set out in the table below.

[Mental health and behaviour in schools \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

	Risk factors	Protective factors
In the pupil	<ul style="list-style-type: none"> • Genetic influences • Low IQ and learning disabilities • Specific development delay/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/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/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/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 • Peer-on-peer abuse • Poor pupil-to-teacher/staff relationships 	<ul style="list-style-type: none"> • Clear policies on behaviour and bullying • Staff behaviour policy/ code of conduct • 'Open door' policy for children to raise problems • A whole-school approach to promoting good mental health • Good pupil-to-teacher/staff relationships • Positive classroom management • A sense of belonging • Positive peer influences • Positive friendships • Effective safeguarding/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

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

- **Loss or separation** - e.g. 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/adopted, or parents being deployed in the armed forces.
- **Life changes:** e.g. the birth of a sibling, moving house, changing schools or transitioning between schools.
- **Traumatic experiences:** e.g. abuse, neglect, domestic violence, bullying, violence, accidents or injuries.
- **Other traumatic incidents:** e.g. natural disasters or terrorist attacks.

Some pupils may be susceptible to such incidents, even if they are not directly affected - e.g. pupils with parents in the armed forces may find global disasters or terrorist incidents particularly traumatic.

Pupils also at a greater risk of experiencing poor mental health are:

- Looked After/Previously Looked After children
- Children in Need - [3. Children in Need - Tees Safeguarding Children Partnerships' Procedures \(teescpp.org.uk\)](#)
- Socio-economically disadvantaged pupils, including those in receipt of, or previously in receipt of, free school meals and the pupil premium
- Young Carers - [Young Carers - Tees Safeguarding Children Partnerships' Procedures \(teescpp.org.uk\)](#)
- Those who identify as LGBTQ+ or who have a Special Educational Need

We ensure that those pupils noted above are identified by school staff and are provided with any additional support that they may need, even if they are not presenting any obvious signs of distress - early help is likely to prevent further difficulties.

Where there are mental health and wellbeing concerns about a child who is looked after or previously looked after by the Local Authority, these will be discussed with the child's social worker (for PLAC, only if they still have one) in addition to their parent/carer. The Virtual School may also be contacted for further advice and support.

[The Virtual School for Vulnerable Learners | Education Services | Hartlepool Borough Council](#)

Early indicators of possible mental health problems

All staff need to be aware of the potential early indicators of mental health issues. These should always be taken seriously and staff who notice these signs should speak to the Designated Safeguarding Lead, or deputy, and/or a Senior Mental Health Lead. All concerns must be logged on the school's online system - CPOMS.

Possible warning signs include:

- Changes in activity and mood; sadness or withdrawal that lasts at least two weeks or severe mood swings
- Increased isolation away from friends or family or becoming unusually socially withdrawn
- Physical signs of harm that appear non-accidental
- Changes in eating habits including excessive unexplained weight loss or weight gain
- Changes in sleeping habits
- Lowering academic achievement

- Repeated lateness or absence from school
- Repeated physical pain or nausea with no evident cause
- Secretive behaviour
- Abusing drugs or alcohol
- Missing Physical Education or getting changed secretly
- Fearful, withdrawn and poor self-esteem
- Aggressive, coercive, or controlling behaviour
- Indiscriminate contact or affection seeking
- Over-friendliness or excessive clinginess
- Expressing feelings of failure, uselessness or helplessness
- Unwilling to talk about feelings
- Finding it hard to concentrate

Possible warning signs in infants up to 2 years old:

- Crying more than usual
- Becoming more easily distressed
- Wanting to be held more/cuddled more than usual

Children between 3-6 years old may return to behaviours they have outgrown:

- Toileting accidents
- Bedwetting
- Frightened of being separated from parents/carers
- Tantrums
- Difficulty sleeping

It is crucial that all staff build good relationships with the children in their care and get to know them well. This will help staff to identify when behaviour changes or is out of character.

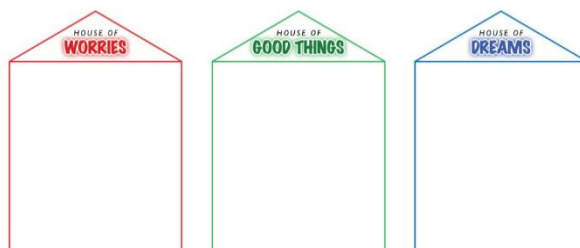
Identifying Need and Monitoring Impact

When a member of staff suspects that a pupil is struggling with their mental health, they must follow the graduated response - as set out below:

1. Concerns to be shared verbally and a written record of these made using the school's online system - CPOMS
2. Triage to take place between Headteacher/Senior Mental Health Lead/wider SLT
3. A plan established which sets out how the pupil will be supported and actions determined to realise the plan
4. An assessment to establish a clear analysis of the pupil's needs
5. Regular review of the effectiveness of support

In order to support the wellbeing and mental health of all pupils and not wait for crisis, we may use the Three Houses tool. We may use this to gain an understanding of pupils' mental health, any potential unknown risks factors, historical adversity and any initial difficulties which could be managed and supported.

Three Houses (teescpp.org.uk)



Assessment, Interventions and Support

At West View Primary School, our graduated response looks like this:

Level of Need	Evidence-based Intervention	Monitoring
Low Need	<p>Daily 'Meet and Greet' by SLT/support staff</p> <p>Check -ins with class teacher/support staff/Inclusion Team</p> <p>myHappyMind curriculum programme for all children from Pre-Nursery to Year 6</p> <p>Access to 'break out' spaces when needed</p> <p>Access to any specific resources to support e.g. Worry Monsters, chew buddies, fidget toys</p> <p>Provision of targeted clubs/activities e.g. RepeaT for Kids, West View Project, extra-curricular activities</p>	<p>Discussions with staff and parents/carers</p> <p>Direct work with/ observations of pupils</p> <p>Online monitoring through CPOMS</p>
Some Need	<p>Support may be sought from the School Nursing Team or Emotional Literacy Support (ELSA)** team in school</p> <p>ELSA Network - Emotional Literacy Support Assistants</p> <p>A sensory assessment may be sought if it is felt that behaviours could be sensory-seeking in nature</p>	<p>Discussions with staff and parents/carers</p> <p>Direct work with/ observations of pupils</p> <p>Individual Education Plan (if applicable)</p> <p>Online monitoring through CPOMS</p>
High Need	<p>Support may be sought from specialist services e.g.</p> <ul style="list-style-type: none"> • ABC Counselling (play therapy, CBT, counselling) * • Alliance Psychological Services • CAMHS • Educational Psychology (including Virtual School Educational Psychology where the child is Looked After) 	<p>Discussions with staff and parents/carers</p> <p>Direct work with/ observations of pupils</p> <p>SDQs</p> <p>YPCORE (if required)</p> <p>Individual Education Plan</p> <p>Online monitoring through CPOMS</p>

*ABC Counselling

[ABC Counselling Services | Counselling, Play Therapy and Family Solutions](#)

West View Primary School commission ABC to provide a bespoke package of emotional wellbeing and mental health support to pupils. Over time, the level of support has increased and we now have the provision of highly trained therapists for 5 days a week, for each week of the academic year. As a school, we fund this through our Pupil Premium allocation - *please refer to the school's Pupil Premium statement for further details.*

If this support was required, this would be determined at the point of triage/planning between the Headteacher, Inclusion Manager and wider SLT. Ms Clarke, Inclusion Manager, would contact parents/carers to discuss this and obtain their consent for a referral to be made.

Prior to any intervention starting with a child, an initial meeting will be held between Ms Clarke, parent/carer and therapist. As we commission this service, we are fortunate that we are not impacted by external factors such as lengthy wait times or funding. There is, therefore, no set limit to the amount of sessions a child may access - this will be wholly dependent upon need and will be determined during the course of the intervention between the therapist, parent/carer, child and school staff.

As part of the school's package, key staff will also have access to Reflective Supervision.

****ELSA**

ELSA Network - Emotional Literacy Support Assistants

ELSA is an educational psychology-led intervention for promoting the emotional wellbeing of children and young people. Our ELSAs in school are Mrs Brown and Miss Stokell. They have both accessed dedicated training, led by an Educational Psychologist and they also attend regular supervision.

Usually, ELSA is a 6-week intervention. It may focus on the following areas: social skills, emotions, bereavement, social stories and therapeutic stories, anger management, self-esteem and/or counselling skills such as solution-focus and friendship.

Prior to any intervention starting with a child, an initial conversation will take place between a member of school staff and parent/carer. The child's class teacher will then complete a referral which will be sent to the Headteacher in the first instance. This will allow for a triage to take place and the referral to then be allocated to one of the ELSAs.

Suicide Concern - Intervention and Support

Where a pupil discloses suicidal thoughts or a member of staff has a concern about a pupil showing signs of suicidal ideations, staff will:

- Listen carefully, remembering it can be difficult for the pupil to talk about their thoughts and feelings
- Respect confidentiality, only disclosing information on a need-to-know basis (letting the pupil know that you need to do this in order to keep them safe)
- Be non-judgemental, making sure the pupil knows that they are being taken seriously
- Be open, providing the pupil with a chance to be honest about their true intentions
- Ensure close supervision of the pupil whilst referring to the DSL/Senior Mental Health Lead for support

- Record details of their observations or discussions and share them with the DSL/Senior Mental Health Lead - also recording these on CPOMS at an appropriate time

Once suicide concerns have been referred to the DSL or Senior Mental Health Lead, the pupil's parent/carer will be contacted so that the information can be shared with them. They will also work together to create a safety plan, outlining how the pupil is kept safe and the support that is available - this will include providing the details for Hartlepool CAMHS Crisis service:

[Crisis and liaison service for children and young people - Tees Esk and Wear Valley NHS Foundation Trust \(teewv.nhs.uk\)](https://www.teewv.nhs.uk)

Crisis - 0800 0516 171 (open 24 hours a day, 7 days a week)

If the child is already accessing additional mental health and wellbeing support, their key professional will be contacted and the relevant information will be discussed as well as any further action that needs to be taken, when and by whom.

Medical professionals, such as the pupil's GP, are notified as needed. This may include making a direct referral to CAMHS:

[Hartlepool CAMHS Children and Young People's Services :: North East and North Cumbria Healthier Together \(nenc-healthiertogether.nhs.uk\)](https://www.nenc-healthiertogether.nhs.uk)

Safety plans:

- Are always created in accordance with advice from external services and the pupil themselves
- Are reviewed regularly by the DSL/Senior Mental Health Lead
- Can include reduced timetables or dedicated sessions with therapists

Monitoring and Review

The policy is reviewed on an annual basis by the Headteacher in conjunction with the Senior Mental Health Lead and wider Senior Leadership Team. Any changes made to this policy are communicated to all members of staff, including the Local Academy Committee.

This policy is reviewed in light of any updates to government guidance and legislation as well as if there are any serious mental health and wellbeing incidents.

All members of staff are required to familiarise themselves with this policy as part of their induction programme.

The next scheduled review date for this policy is March 2026.