

Stanborough Primary School & Nursery

Mental Health and Emotional Wellbeing Policy



Approved by:

Date:

Last reviewed on:

September 2026

Next review due by:

September 2027

"I can do all things through Him who strengthens me."

Philippians 4:13

Senior Mental Health and Wellbeing Leads: Rebecca Dean and Natasha Kochhar

Designated Safeguarding Lead: Rebecca Dean

Headteacher: Tiann Madden

1. Policy Statement

At Stanborough Primary School & Nursery, we recognise that positive mental health and emotional wellbeing are fundamental to children's safety, development, learning, relationships and ability to flourish. Our Christian ethos places the wellbeing, dignity and individual worth of every child at the heart of school life. We aim to create a culture where children feel known, valued, listened to, included and safe to seek help.

Mental health and emotional wellbeing are therefore understood as a **whole-school responsibility**. We promote positive wellbeing for all children, identify emerging concerns early, provide appropriate school-based support and work in partnership with families and external professionals where additional or specialist support is required. Our approach recognises that children's emotional wellbeing is influenced by their relationships, experiences, physical health, SEND, family circumstances, online experiences, attendance and wider environment. We therefore seek to understand the whole child rather than viewing mental health or behaviour in isolation. This policy applies to all pupils from Early Years through to Year 6 and provides guidance for staff, governors, volunteers and others working within the school.

2. Statutory and Local Context

This policy has been developed with regard to current national and local guidance, including **Keeping Children Safe in Education 2026**, **Working Together to Safeguard Children 2026**, current statutory Relationships Education, Relationships and Sex Education and Health Education guidance, the SEND Code of Practice, the Equality Act 2010 and relevant Early Years Foundation Stage requirements.

The revised Relationships, Sex and Health Education statutory guidance came into force on **1 September 2026** and applies to schools, including proprietors of independent schools. It strengthens expectations around children's understanding of relationships, emotional wellbeing, recognising difficulties and seeking appropriate help. As a Hertfordshire school, Stanborough works within the procedures and expectations of the **Hertfordshire Safeguarding Children Partnership** and uses appropriate Hertfordshire early-help, safeguarding and children and young people's mental-health pathways.

3. Our Aims

Through this policy and our wider school provision, we aim to create a school culture in which mental health and emotional wellbeing can be discussed openly and without stigma. We want children to develop the language and confidence to recognise and express emotions, build resilience, develop healthy relationships, understand strategies that support their wellbeing and know when and how to ask for help. We aim to ensure that staff are confident in recognising changes in children's presentation and understand the difference between providing everyday emotional support and responding to concerns that require safeguarding, SEND, health or specialist intervention.

Early identification and support are central to our approach. We seek to provide the **right help at the right time**, while recognising clearly the limits of the school's role and referring to appropriately qualified services where necessary.

4. Mental Health and Safeguarding

Mental health and safeguarding are closely connected. In accordance with **Keeping Children Safe in Education 2026**, staff understand that mental-health difficulties can, in some circumstances, develop into safeguarding concerns. Significant concerns may include **self-harm, eating disorders, suicidal ideation or suicidal planning**. KCSIE 2026 strengthened the section on children requiring mental-health support specifically to make the relationship between serious mental-health difficulties and safeguarding responsibilities clearer. Only appropriately trained professionals should diagnose a mental-health condition. The role of school staff is to **notice, listen, support, record, report and refer**. Staff may become concerned because of changes in a child's behaviour, mood, relationships, attendance, eating or sleeping patterns, self-care, engagement with learning or usual interests. Children may also present with unexplained physical complaints, increased anxiety, withdrawal, distress, hopelessness or physical signs of harm. No single sign confirms that a child has a mental-health difficulty. Staff remain professionally curious, consider the wider context and share concerns appropriately rather than attempting to diagnose the cause themselves.

Where a mental-health concern may also represent a safeguarding concern, staff must follow the school's **Safeguarding and Child Protection Policy** and report the concern to the DSL or Deputy DSL without delay. All staff are required to read **Part One of KCSIE 2026 in full** and follow the school's safeguarding procedures. The shorter overview is a complementary reference and does not replace Part One.

5. Our Whole-School Approach to Wellbeing

Mental health and emotional wellbeing are embedded within the culture of Stanborough rather than being treated solely as an intervention for children who are experiencing difficulties. Our approach combines **universal wellbeing provision for all children, early and targeted support when needs emerge, and specialist or multi-agency support where needs are more significant**. Positive relationships are central to this approach. Adults seek to provide predictable routines, appropriate boundaries, opportunities for children to talk and safe relationships with trusted adults.

Children's voices are valued. Children are supported to express their thoughts and feelings in ways appropriate to their age, development and communication needs, and their views are considered when planning support. Mental health and wellbeing are considered alongside safeguarding, SEND, attendance, behaviour and family circumstances so that children's needs are understood holistically.

6. Stanborough's Bespoke Wellbeing Curriculum

Alongside statutory Relationships and Health Education, Stanborough has developed a **bespoke wellbeing curriculum** which reflects the needs of our children and our Christian values. The curriculum supports children's development of emotional literacy, self-awareness, resilience, self-regulation, confidence, healthy relationships, belonging, kindness, personal safety and help-seeking.

Wellbeing is given protected time within the school week through our **Wellbeing Wednesday** approach. Wednesday is a whole-school non-uniform day which helps to give wellbeing a visible and positive identity across Stanborough, alongside dedicated age-appropriate wellbeing sessions and

activities. Each class has a **weekly wellbeing focus/session**, providing regular opportunities for children to explore emotions, relationships, regulation, resilience, safeguarding, healthy choices and other themes relevant to their age and current needs.

Wellbeing teaching is responsive. While there is a planned curriculum, staff may appropriately adapt the focus when pupil voice, safeguarding information, class needs or wider events indicate that a different issue would benefit from discussion. Across the school, children are supported to develop a shared language for recognising and regulating emotions. Approaches such as the **Zones of Regulation** are used developmentally to help children identify how they are feeling and recognise strategies that may help. Within the Early Years, wellbeing is embedded particularly through secure relationships, co-regulation, play, stories, emotional vocabulary, predictable routines and developmentally appropriate experiences.

Parental Right to Withdraw from Sex Education

Parents have the right to request that their child be withdrawn from some or all of sex education delivered as part of statutory RSE, but not from relationships education or health education. The headteacher will discuss requests with parents and, where appropriate, with the child to ensure their wishes are understood and to clarify the nature and purpose of the curriculum. Except in exceptional circumstances, requests will be granted up to and until three terms before the child turns 16. After that point, if the child wishes to receive sex education rather than be withdrawn, the school will make arrangements to provide the child with sex education during one of those terms. As a primary school, our RSE curriculum focuses primarily on relationships education and health education. Any sex education content beyond the national curriculum for science is age-appropriate and limited. Parents wishing to discuss the curriculum or exercise their right to withdraw should contact the headteacher.

7. Teaching About Mental Health and Emotional Wellbeing

Mental-health education is delivered safely, sensitively and in ways appropriate to children's age and stage of development. In line with the revised statutory guidance effective from September 2026, children progressively learn to identify and talk about emotions, recognise that everyone experiences difficult feelings at times, understand the importance of friendship and connection and recognise when they or another person may need help.

Teaching also supports children to understand how factors such as physical activity, sleep, healthy relationships, time outdoors, hobbies, routines and asking for help can contribute positively to wellbeing. Children learn that trusted adults can help them and that asking for support is a positive action. Sensitive mental-health topics are approached carefully. At primary-school level, we do not routinely provide detailed teaching about methods of self-harm or suicide. If a child raises these issues or staff identify a concern, this is addressed individually through safeguarding and appropriate professional support rather than through unnecessary or potentially harmful classroom detail.

8. Identifying Children Who May Need Additional Support

Staff are well placed to notice changes because of the regular relationships they build with children.

Possible indicators of emotional or mental-health difficulty may include significant or persistent changes in mood or behaviour, withdrawal from friends or activities, increased anxiety, changes in eating or sleeping, reduced self-care, unexplained physical complaints, falling engagement with learning, repeated lateness or absence, references to hopelessness, self-harm or suicide, or changes

which are unusual for that particular child. Staff recognise that similar presentations may have many causes. Factors may include bereavement, family changes, friendship difficulties, bullying, SEND, neurodivergence, sensory needs, trauma, domestic abuse, discrimination, caring responsibilities, online experiences, physical illness or wider safeguarding concerns.

At Stanborough, we recognise that **behaviour is communication**. Where behaviour changes or becomes challenging, adults seek to understand what may be underlying or contributing to the behaviour rather than focusing only on the behaviour itself. Concerns are shared with the safeguarding team and/or Senior Mental Health and Wellbeing Lead as appropriate.

9. Targeted Wellbeing Support

Some children benefit from additional support beyond the universal wellbeing curriculum.

Stanborough provides targeted wellbeing support according to individual need. This may include **regular check-ins with a trusted adult, one-to-one wellbeing sessions, small-group support, mentoring, emotional-regulation work, pastoral support and individual strategies within the classroom**. Our wellbeing support staff may work directly with individual children where an emotional or wellbeing need has been identified. The purpose, frequency and duration of support are based on the child's needs rather than applying the same programme to every child. Children receiving targeted support remain part of their class and wider school community. Wellbeing intervention should complement, rather than unnecessarily remove children from, their curriculum and peer relationships. Support is reviewed regularly and may be increased, reduced or adapted according to children's progress and circumstances. Where needs are persistent, complex or beyond the level that school staff can appropriately provide, the school works with parents/carers and relevant professionals to access further support.

10. Individual Wellbeing Support Plans

Where a child requires ongoing or more complex support, an **Individual Wellbeing Support Plan** may be developed. Plans are proportionate to need and may record the child's strengths, presenting needs, known triggers, protective factors, helpful strategies, reasonable adjustments, trusted adults, family views, professional involvement and actions to be taken if concerns escalate. Where appropriate, children are involved in planning their own support. If a child also has SEND, emotional and mental-health needs are considered within the school's graduated response and coordinated with the SENCo/Inclusion Lead. School staff do not provide clinical diagnosis or therapeutic intervention outside their training and professional competence.

11. Responding to a Disclosure

If a child talks to a member of staff about their emotional or mental health, the adult will respond calmly, listen carefully and take the child seriously. Staff should not promise confidentiality, ask leading or unnecessary questions or attempt to investigate or diagnose the child. The child's words should be recorded as accurately as possible on **CPOMS**, together with relevant observations, actions and decisions. Information should then be shared with the safeguarding team or appropriate lead. Once recorded on CPOMS, the concern will be reviewed by the DSL or Deputy DSL, who will determine the appropriate next steps. This may include monitoring, parental contact, referral to external services, or immediate safeguarding action depending on the nature and severity of the

concern. Where safe and appropriate, the child should be helped to understand what will happen next and which adults need to know. A significant concern must never be held by one adult alone.

12. Self-Harm, Eating Disorders and Suicidal Ideation

All staff understand that concerns relating to **self-harm, eating disorders, suicidal thoughts or suicidal planning** require prompt attention and may represent safeguarding concerns. KCSIE 2026 makes this link significantly clearer than previous versions of the guidance and emphasises appropriate referral pathways and targeted support. Any disclosure or indication that a child may be at immediate risk of serious harm must be reported to the DSL or Deputy DSL immediately. Where there is an immediate threat to life or serious injury, staff should call **999** and follow safeguarding and emergency procedures. A child at immediate risk should remain appropriately supervised while help is arranged. KCSIE's current guidance is clear that staff should act immediately on safeguarding concerns and call 999 where a child is in immediate danger.

For urgent mental-health advice in Hertfordshire, the **Hertfordshire Partnership University NHS Foundation Trust Single Point of Access (SPA)** can provide advice, signposting and access to appropriate services on **0800 6444 101**. Hertfordshire also identifies SPA as a route to support including Step2 and specialist CYPMHS.

13. Working With Parents and Carers

Parents and carers are important partners in children's emotional wellbeing. Wherever appropriate and safe, concerns are discussed sensitively with families and parents are involved in planning support. We recognise that conversations about a child's mental health can be difficult for families. Staff communicate respectfully, focus on the child's needs and strengths and provide appropriate information and signposting. However, **safeguarding takes priority**. Parents are not automatically informed before safeguarding advice has been considered. Where informing a parent could place a child at additional risk, interfere with a safeguarding enquiry or otherwise not be in the child's best interests, the DSL or Deputy DSL will determine the appropriate course of action in accordance with safeguarding procedures. Children should never be promised that information relating to their safety will remain confidential.

14. SEND, Vulnerability and Equality

We recognise that some children may experience additional vulnerabilities or barriers to positive mental health. This may include children with SEND or neurodivergence, looked-after and previously looked-after children, young carers, children experiencing bereavement or family separation, children affected by domestic abuse, those experiencing discrimination, children known to social care and those who have experienced trauma or significant adversity. Mental-health difficulties do not automatically mean that a child has SEND. However, where an emotional or mental-health difficulty has a significant and long-term impact on a child's ability to access education, the school will consider its duties under the SEND Code of Practice and Equality Act 2010. Reasonable adjustments and support are based on the child's individual needs rather than diagnosis alone. Our provision seeks to be inclusive and culturally sensitive, recognising that children and families may express distress and seek support in different ways.

15. Hertfordshire Support and Referral Pathways

Stanborough works with appropriate Hertfordshire services to ensure children receive the **right support at the right time**. The **CYPMHS HertsHub** provides families, young people and professionals with information about mental-health services, self-help resources, early support and specialist provision across Hertfordshire. Depending on the child's age and level of need, support may include the GP, Health Visiting, School Nursing, **Families First**, Step2, Mental Health Support Teams where available, specialist Children and Young People's Mental Health Services (CYPMHS), eating-disorder services, crisis services or PALMS where eligibility criteria are met. Specialist CYPMHS across Hertfordshire supports children and young people with moderate to severe emotional and behavioural difficulties and includes specialist provision such as Eating Disorders, crisis and Mental Health Support Teams.

Mental Health Support Teams (MHSTs)

Stanborough does not currently have direct access to a Mental Health Support Team (MHST). We continue to work with available Hertfordshire services including Step2, school nursing, and specialist CYPMHS where appropriate. We will seek to access MHST provision if it becomes available in our area. Referrals and requests for support are made according to the child's needs, service criteria and current Hertfordshire pathways.

Where concerns indicate that a child may be at risk of significant harm, mental-health referral routes do not replace children's social-care or emergency safeguarding procedures.

16. Attendance and Mental Health

Mental health and attendance can influence one another. Changes in attendance, increasing lateness, school avoidance or repeated absence may indicate emotional difficulty or wider safeguarding concerns and should not be considered in isolation. Where emotional or mental-health needs are affecting attendance, staff seek to understand the barriers and work with the child, family and relevant professionals while maintaining the child's right to education and appropriately high expectations for attendance. Attendance concerns are managed alongside the school's Attendance and Safeguarding policies.

17. Online Safety and Mental Health

We recognise that children's online experiences can have both positive and negative effects on emotional wellbeing. Staff remain alert to online bullying, harmful challenges, inappropriate contact, exploitation, body-image content and material relating to self-harm, suicide or eating disorders.

Children receive age-appropriate online-safety education and are encouraged to speak to a trusted adult if online content or interactions make them feel frightened, worried, uncomfortable or upset. Any online concern presenting a safeguarding risk is referred to the DSL and managed under the school's safeguarding and online-safety procedures.

18. Supporting Peers

Children often want to help a friend who is struggling and we encourage kindness, empathy and looking out for others. However, children are taught that **they are never responsible for managing another child's mental health or keeping another child safe**. If a child is worried about a friend, the appropriate response is to tell a trusted adult. Where one child's difficulties have affected friends or

peers, those children may also be offered appropriate emotional support while the confidentiality and dignity of the child concerned are protected.

19. Staff Training and Responsibilities

Promoting positive mental health and emotional wellbeing is the responsibility of all staff.

Staff receive safeguarding and appropriate wellbeing training to help them recognise concerns, respond safely to disclosures, understand the relationship between mental health and safeguarding and know how to access support.

In accordance with KCSIE 2026, **all staff read Part One in full.**

The Senior Mental Health and Wellbeing Leads provide strategic leadership for the whole-school approach, support staff development, coordinate appropriate wellbeing provision and work with safeguarding, SEND and other leaders. Staff are not expected to diagnose mental-health conditions or provide therapy unless they are appropriately qualified and employed to do so. Where additional knowledge or expertise is required, appropriate professional advice or training is sought.

20. Staff Mental Health and Wellbeing

Stanborough recognises that the wellbeing of staff contributes to a healthy school culture and affects adults' capacity to support children effectively. Leaders seek to foster an environment in which staff feel able to raise concerns, access appropriate support and discuss workload and wellbeing.

Support may include professional conversations, mentoring, coaching, peer support, signposting and reasonable adjustments where appropriate. Staff are encouraged to access appropriate professional health support where needed. School-based wellbeing provision does not replace medical or specialist mental-health care.

Staff Wellbeing Support and Signposting

Staff can access confidential support through:

- **Education Support Partnership** – 08000 562 561 (24/7 helpline specifically for education staff)
- **Occupational Health** (via school procedures)
- Their GP or NHS services
- **Samaritans** – 116 123 (24/7)
- **Mind Infoline** – 0300 123 3393
- **Anxiety UK** – 03444 775 774

Staff experiencing mental health difficulties are encouraged to speak to a member of the Senior Leadership Team in confidence. The school will work with staff to provide appropriate support and reasonable adjustments where needed.

21. Confidentiality, Recording and Information Sharing

Records relating to children's mental health, wellbeing and safeguarding are factual, proportionate and stored securely. Information is shared on a need-to-know basis where this is necessary to support or safeguard a child. Children should be told, in age-appropriate language, when information needs to be shared and why, unless doing so would create additional risk.

Data protection legislation is not a barrier to appropriate safeguarding information sharing. KCSIE 2026 reinforces that necessary information should be shared and recorded where this is required to protect a child. Records should clearly identify the concern, action taken, decisions made, rationale and outcomes.

22. Leadership, Monitoring and Evaluation

Senior Mental Health and Wellbeing Leads: Rebecca Dean and Natasha Kochhar

Designated Safeguarding Lead: Rebecca Dean

Inclusion Lead: Joanna Swain

Headteacher: Tiann Madden

The Senior Mental Health and Wellbeing Leads work with the Headteacher, safeguarding team, Inclusion Lead, staff, governors, children and families to develop and evaluate the school's approach.

Monitoring may include pupil voice, safeguarding themes, attendance, behaviour, SEND information, participation in wellbeing provision, use and impact of targeted support, parent feedback, referrals and staff training. Our bespoke wellbeing curriculum and weekly provision are reviewed in response to children's needs and emerging priorities rather than remaining static. The effectiveness of individual wellbeing interventions is reviewed so that support continues only where it is appropriate and beneficial. The Governing Body provides appropriate oversight and challenge in relation to mental health, safeguarding and the effectiveness of the school's whole-school approach.

23. Key Staff and School Support

All staff have responsibility for children's wellbeing and should report concerns through established school procedures. The school's core support includes the Senior Mental Health and Wellbeing Leads, safeguarding team, Inclusion Lead, teaching staff, wellbeing and pastoral support staff and school chaplaincy/pastoral provision. Children may access support through their class teacher or another trusted adult, scheduled wellbeing support, one-to-one or group provision, pastoral support and safeguarding/SEND support where appropriate.

Children and families are signposted to external support where their needs require services beyond those the school can appropriately provide.

24. Linked Policies and Documents

This policy should be read alongside the school's Safeguarding and Child Protection Policy, SEND and Inclusion Policy, Behaviour Policy, Attendance Policy, Relationships/PSHE Policy, EYFS Policy, Online Safety Policy, Anti-Bullying Policy, Equality Policy, Health and Safety Policy, First Aid and Medicines procedures, Staff Wellbeing arrangements, Data Protection Policy and relevant individual support and risk-assessment plans.

25. Policy Review

This policy will be reviewed annually by the Senior Mental Health and Wellbeing Leads and Headteacher and approved by the Governing Body. It will be reviewed earlier where there are significant changes to statutory safeguarding guidance, Relationships and Health Education guidance, Hertfordshire referral arrangements or school practice.

26. Emergency and Crisis Contacts Immediate Danger or Life-Threatening Situation

Call 999

Hertfordshire Mental Health Crisis Support

Hertfordshire Partnership University NHS Foundation Trust Single Point of Access (SPA):

0800 6444 101 (24/7)

Safeguarding

- Designated Safeguarding Lead: Rebecca Dean
- Hertfordshire Children's Services: 0300 123 4043
- Out of hours emergency duty team: 0300 123 4043

National Support Lines

For Children:

- **Childline:** 0800 1111 (24/7)
- **The Mix:** 0808 808 4994 (for under 25s)
- **Papyrus (suicide prevention for under 35s):** 0800 068 4141

For Parents and Families:

- NSPCC Helpline: 0808 800 5000
- Family Lives: 0808 800 2222
- YoungMinds Parents Helpline: 0808 802 5544

For Everyone:

- **Samaritans:** 116 123 (24/7)
- **Shout Crisis Text Line:** Text SHOUT to 85258 (24/7)

Online Resources

- **HertsHub (CYPMHS information):** www.hertsmindnetwork.org/hertshub
- **YoungMinds:** www.youngminds.org.uk
- **MindEd (for professionals):** www.minded.org.uk
- **Anna Freud Centre:** www.annafreud.org
- **Place2Be:** www.place2be.org.uk

Key Guidance Informing This Policy

- Keeping Children Safe in Education 2026
- Working Together to Safeguard Children 2026
- Relationships Education, Relationships and Sex Education and Health Education statutory guidance, September 2026
- SEND Code of Practice: 0–25 Years
- Equality Act 2010
- Hertfordshire Safeguarding Children Partnership procedures
- Hertfordshire Children and Young People's Mental Health Services and HertsHub guidance
- Hertfordshire Families First and local early-help arrangements