Murray Park School

Mental Health Policy 2026

Introduction

Key people / dates

MURRAY PARK SCHOOL	Designated Safeguarding Lead (DSL) team	Rebecca Somes, Joe Hyndman, Theresa Lucas .
	Mental Health Lead (if different)	Sian Hubbard.
	PSHE/RSHE lead	Lucy Mitchell
	SENDCo	Sian Hubbard.
	Date this policy was reviewed and by whom	September 2026 Sian Hubbard
	Date of next review and by whom	July 2027 Sian Hubbard

What is this policy?

A school mental health policy explains and sets out the school's commitment to its students' mental health. It should outline how the school will support its students, its ongoing commitment to staff training, and how it will work with the wider community to promote student wellbeing. It should include and have regard for Statutory guidance including 'Keeping Children Safe in Education' 2020 (KCSIE) and 'Relationships Education, Relationships and Sex Education (RSE) and Health Education' 2020

Who oversees Mental Health?

It is advised that a school should have a Mental Health lead within schools, however Mental Health and Wellbeing should form part of a whole school approach and is embedded in our personal development curriculum.

Why the need for a Mental Health policy?

The Government's Transforming Children and Young People's Mental Health Provision Green Paper (Department of Health, Department of Education 2017) included a focus on early intervention and prevention and the central role of schools. A key theme is that there will be incentives for every school or college to identify a Designated Senior Lead for Mental Health to oversee the approach to mental health and well-being.

Young Minds charity reports that **one in five young adults**, and **one in ten children have** a diagnosable mental health disorder. That translates to roughly **three children in every classroom**.

Mental health issues can affect a student's emotional wellbeing as well as their educational attainment. Developing a Mental Health Policy is a first starting point in establishing a whole school approach that not only addresses student mental health but also shows students and their parents that the school is committed to the wellbeing and mental health of the students. Additionally, it signals to students that the school is understanding of mental health issues and encourages them to come forward with their difficulties. A mentally healthy school is one that has a whole-school approach to the topic of mental health and sees the mental health of its students, staff, and parents as everybody's responsibility.

How will this policy be communicated?

It will be communicated in the following ways:

- Posted on the school website.
- Available on the internal staff Teams page.
- Part of school induction pack for all new staff (including temporary, supply and non-classroom-based staff).
- Integral to safeguarding updates and training for all staff (especially in September refreshers).
- Reviews of this policy will include input from staff, pupils and other stakeholders, helping to ensure further engagement.

1.Policy Statement

At Murray Park School, we are committed to promoting a positive mental health for every member of our staff and student body, their families and governors. We pursue this aim using universal, whole school approaches and specialised targeted approaches aimed at vulnerable students, staff and parents and using effective policies and procedures we ensure a safe and supportive environment for all affected - both directly and indirectly - by mental ill health. We know that everyone experiences life challenges that make us vulnerable, and at times anyone may need additional emotional support. We take the view that positive mental health is everybody's business and that we all have a role to play. We also ensure that staff mental health and wellbeing is considered in relation to workload and stress, and we have clear procedures to ensure any concerns around staff wellbeing are addressed by the senior leadership team.

2. Scope

This policy describes the school's approach to promoting positive mental health and wellbeing for staff and students. This policy is intended as guidance for all staff including non-teaching staff and governors. It should be read in conjunction with other relevant school policies.

3. Policy aims

- Promote positive mental health and well-being in our school community, including students, parents, staff and governors.
- Increase understanding and awareness of common mental health and wellbeing issues.
- Alert staff to early warning signs of mental ill health.
- Provide the right support to students with mental health issues, and know where to signpost them and their parents/carers for specific support.
- Develop resilience amongst students and raise awareness of resilience building techniques.
- Raise awareness amongst staff and gain recognition from SLT that staff may have mental health issues, and that they are supported in relation to looking after their wellbeing; instilling a culture of staff and student welfare where everyone is aware

of signs and symptoms with effective signposting underpinned by behaviour and welfare around school. This relates to stress and workload also.

4. Concerns about Positive Mental health and Wellbeing

Whilst all staff have a responsibility to promote the mental health of students, staff with a specific relevant remit include:

- Rebecca Somes – Designated Safeguarding Lead.
- George Hagen – Acting Headteacher.
- Theresa Lucas – Deputy Designated safeguarding Lead, Inclusion and attendance.
- Sian Hubbard – Mental Health First Aid Lead.
- Sian Hubbard – SENDCo.
- Joe Hyndman– Assistant Head and Personal Development Lead.

School staff could become aware of changes in behaviour which may indicate a student is experiencing mental ill health or emotional wellbeing issues.

These changes may include:

- Physical signs of harm that are repeated or appear non-accidental.
- Changes in eating or 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.
- Skipping PE or getting changed secretively.
- Lateness to or repeated absence from school.
- Repeated physical pain or nausea with no evident cause.
- An increase in lateness or absenteeism.

Any member of staff who is concerned about the mental health or wellbeing of a student should speak to the student's HOY or Sian Hubbard (Mental Health Lead) in the first instance. If there is a concern that the student is in danger of immediate harm, then the school's safeguarding procedures should be followed. If the student presents a medical emergency, then the normal procedures for medical emergencies should be followed, including alerting the first aid staff and contacting emergency services if necessary.

On occasion, a referral to CAMHS may be appropriate, this will be led and managed by Sian Hubbard or the Head of Year. Guidance about referring to CAMHS is provided in Appendix A.

When a pupil has been identified as having cause for concern, has received a diagnosis of a mental health issue, or is receiving support either through CAMHS or another organisation, it is recommended that an Individual Care Plan/safety plan will be created. The development of the plan should involve the pupil, parents, and relevant professionals.

We also follow the Emotionally Based School Non Attendance (EBSNA) guidance from the Local Authority and support young people through the Graduated Response.

Staff can discuss concerns around mental health, stress or workload with their line manager, Sian Hubbard or the senior leadership team. In the event of staff absence being related to work-based stress, the back to work interviews with line managers will address any concerns and implement actions to support that staff member. Staff will be signposted to support services available should this be required.

5. Teaching about Mental Health

The skills, knowledge and understanding needed by our children to keep themselves and others physically and mentally healthy safe are included as part of our PSHCE curriculum and embedded throughout our school learning community in line with the DfE RSE guidance (note this is statutory from 2020).

So that by the end of Primary School pupils should know:

- That mental wellbeing is a normal part of daily life, in the same way as physical health.
- That there is a normal range of emotions (e.g. happiness, sadness, anger, fear, surprise, nervousness) and scale of emotions that all humans experience in relation to different experiences and situations.
- How to recognise and talk about their emotions, including having a varied vocabulary of words to use when talking about their own and others' feelings.
- How to judge whether what they are feeling and how they are behaving is appropriate and proportionate.
- The benefits of physical exercise, time outdoors, community participation, voluntary and service-based activity on mental wellbeing and happiness.
- Simple self-care techniques, including the importance of rest, time spent with friends and family and the benefits of hobbies and interests.
- Isolation and loneliness can affect children and that it is very important for children to discuss their feelings with an adult and seek support.
- That bullying (including cyberbullying) has a negative and often lasting impact on mental wellbeing.
- Where and how to seek support (including recognising the triggers for seeking support), including whom in school they should speak to if they are worried about their own or someone else's mental wellbeing or ability to control their emotions (including issues arising online).
- It is common for people to experience mental ill health. For many people who do, the problems can be resolved if the right support is made available, especially if accessed early enough.

The specific content of lessons will be determined by the specific needs of each cohort but there will always be an emphasis on enabling students to develop the skills, knowledge, understanding, language and confidence to seek help, as needed, for themselves or others.

Lessons will also be supported by assemblies throughout the year talking about Mental Health and working alongside Compass Changing Lives who offer external support to our referred students.

6. Managing Disclosures

At times, a pupil may choose to tell a staff member concerns that they have about their own emotions or well-being. All staff need to know how to respond appropriately to a disclosure.

All staff should respond in a calm, supportive and non-judgemental way.

Staff should listen rather than advise and their first thoughts should be of the student's emotional and physical safety rather than of exploring 'Why?'

All disclosures should be recorded on CPOMs and shared with Sian Hubbard (Mental Health Lead), who will store the record appropriately and offer support and advice about next steps.

6.1 Confidentiality

Staff must be honest with regards to the issue of confidentiality. They should never promise the person that they will keep this to themselves and should inform the pupil who they are going to talk to, what they are going to tell them and why it is important that they pass these concerns on.

6.2 Informing Parents/Carers

Parents will usually be informed if a child makes a disclosure and staff need to be sensitive when sharing this with parents/carers. It can be upsetting for parents to learn of their child's issues and staff should give the parent/ carer time to reflect. A brief record of the meeting should be kept in line with school policy. Staff should always highlight further sources of information where possible to offer support to the parent

However, if a child gives reason to believe that there may be underlying child protection issues, parents may not be informed, and Rebecca Somes (Designated Safeguarding Lead) should be informed immediately so that an appropriate referral can be made.

7. Working with parents/carers and the school community

We recognise the family plays an important role in influencing children and young people's emotional health and wellbeing; we will work in partnership with parents and carers to promote emotional health and wellbeing by:

- Ensuring that all parents are aware of who to talk to if they have any concerns about their child's mental health and wellbeing
- Highlighting sources of information and support about common mental health issues through our communication channels (website, newsletters etc.)
- Make the school policy easily accessible to parents and carers
- Keep parents informed about the topics that children are learning about in school.
- Carry out parent workshops/information sessions to raise awareness of mental health and well-being.

8. Training

As a minimum, all staff will receive regular training about recognising and responding to mental health issues as part of their regular child protection training to enable them to keep students safe. The Mental Health Lead will receive professional Mental Health First Aid training or equivalent. We will publish relevant information to staff who wish to learn more about mental health and this policy will be provided to all staff as part of their induction. Training opportunities for staff who require more in-depth knowledge will be considered as part of our performance management process and additional CPD will be supported throughout the year where it becomes appropriate.

We will host twilight training sessions for all staff to promote learning or understanding about specific issues related to mental health throughout the year and as appropriate.

9. Policy Review

This policy will be reviewed every two years as a minimum. The next review date is July 15th 2027.

In between updates, the policy will be updated when necessary to reflect local and national changes. This is the responsibility of Sian Hubbard.

Appendix A: Guidance about CAMHS referral

If the referral is urgent it should be initiated by phone so that CAMHS can advise of best next steps

Before making the referral, have a clear outcome in mind, what do you want CAMHS to do? You might be looking for advice, strategies, support or a diagnosis for instance.

You must also be able to provide evidence to CAMHS about what intervention and support has been offered to the pupil by the school and the impact of this. CAMHS will always ask 'What have you tried?' so be prepared to supply relevant evidence, reports and records.

General considerations

- Have you met with the parent(s)/carer(s) and the referred child/children?
- Has the referral to CAMHS been discussed with a parent / carer and the referred pupil?
- Has a parent / carer given consent for the referral?
- What are the parent/carer pupil's attitudes to the referral?

Basic information

- Is there a child protection plan in place?
- Is the child looked after?
- name and date of birth of referred child/children
- address and telephone number
- who has parental responsibility?
- surnames if different to child's
- GP details
- What is the ethnicity of the pupil / family.
- Will an interpreter be needed?
- Are there other agencies involved?

Reason for referral

- What are the specific difficulties that you want CAMHS to address?
- How long has this been a problem and why is the family seeking help now?
- Is the problem situation-specific or more generalised?
- Your understanding of the problem/issues involved.

Further helpful information

- Who else is living at home and details of separated parents if appropriate?
- Name of school
- Who else has been or is professionally involved and in what capacity?
- Has there been any previous contact with our department?
- Has there been any previous contact with social services?
- Details of any known protective factors
- Any relevant history i.e. family, life events and/or developmental factors
- Are there any recent changes in the pupil's or family's life?
- Are there any known risks, to self, to others or to professionals?
- Is there a history of developmental delay e.g. speech and language delay
- Are there any symptoms of ADHD/ASD and if so have you talked to the Educational psychologist?