



Emotional Health and Wellbeing Policy 2024

Version	2
Officer Responsible for Policy	Kate Roberts
Consultation Process	
Date of Approval and Committee	Pupil and Curriculum
Effective Date	March 2024
Next Review Date	March 2025

1. Policy Statement

To learn, grow and develop I need to feel loved, safe and secure. If I do not feel these things, I may begin to struggle with my emotions. I may begin to feel sad, worried or display challenging behaviour. This document helps my teachers and the other staff at school know how best to support me and my classmates as well as each other.



At Moorlands Primary School, we aim to promote positive emotional health and wellbeing.

As well as recognising and responding to emotional ill health both in our pupils and our staff.

In an average classroom, three children will be suffering from a diagnosable mental health issue.

By developing and implementing practical, relevant and effective emotional health policies and procedures we can promote a safe and stable environment for students affected both directly, and indirectly by emotional ill health.

2. Scope

This document describes the Moorlands Primary School's approach to promoting positive emotional health and wellbeing. This policy is intended as guidance for all staff including non-teaching staff and governors /trustees.

This policy should be read in conjunction with other relevant policies including:

- Medical policy
- SEND policy
- Safeguarding and Child Protection Policy.
- Behaviour Policy

This Policy aims to:

- Promote positive emotional health in all staff and students.
- Alert staff to early warning signs of emotional ill health.

- Provide support to staff working with young people with emotional health issues.
- Provide support to students suffering emotional ill health and their peers and families/carers.

3. Lead Members of Staff

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

Name Kate Roberts	Role Senior Mental Health Lead
Name Lorraine Wells	Role ELSA
Name Laura Smith	Role SENCO

If I'm worried about anything, I can talk to any adult that I trust, who works at school. They might then need to speak to the people listed, who can help them to make sure I get the support I need.



Key personnel The Designated Safeguarding Lead (DSL) for child protection is	The Nominated Child Protection Governor is Kerry Gorton Tel: 0121 556 0352
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Kate Roberts

email: kate.roberts@moorlandsprimaryschool.org

Tel: 0121 556 0352

The Deputy Designated Safeguarding Lead is/are

Laura Smith

email: laura.smith@moorlandsprimaryschool.org

Tel: 0121 556 0352

Lorraine Wells

email: Lorraine.wells@moorlandsprimaryschool.org

Tel: 0121 556 0352

Helen Williams

email: helen.williams@moorlandsprimaryschool.org

Tel: 0121 556 0352

The Headteacher is Kate Roberts

email: kate.roberts@moorlandsprimaryschool.org

Tel: 0121 556 0352

4. Staff acting on concerns

A member of staff who is concerned that a student's emotional wellbeing is not responding to universal support (TA support, general encouragement) should speak to the safeguarding team as well as recording their concerns on the student's personal file.

If there is a fear that the student is in danger of immediate harm, then the normal child protection procedures should be followed with an immediate referral to the Safeguarding Team. 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 the emergency services if necessary.

Where a referral to CAMHS is appropriate, this will be led and managed by the Safeguarding Department. Guidance about referring to CAMHS is provided in Appendix F.



My emotions will have highs and lows, however if a member of staff feels that I may need some support with my emotions they will speak to the safeguarding team to talk about how best to support me.

If the staff are worried that I am in danger they will act quickly to ensure that I'm safe. They will tell me everything I need to know about what they are doing and why they are doing it.

5. Individual Care Plans

Individual care plans should be drawn up for students causing concern or who receive a diagnosis pertaining to their emotional health.

This should be drawn up involving the student, the families and relevant health professionals.

This should include:

- Details of a student's condition
- Special requirements and precautions
- Medication and any side effects
- What to do, and who to contact in an emergency
- The role the Moorlands Primary School can play

Copies of relevant communication between Moorlands Primary School, parents/carers and relevant health professionals should also be kept on the child's file.

An example can be found in appendix A

If I receive a diagnosis the school, my family and healthcare professionals should discuss their plans to help me, and then write it down so that everyone knows their role in supporting me.



6. Teaching about Emotional Health

Our curriculum enables students to develop the skills, knowledge, understanding, language and confidence to seek help regarding emotional health.

The Moorlands Primary School ensures that staff, students and families are aware of sources of support within Moorlands Primary School and in the local community, and how to access these. Examples include:

- Childline 0800 11 11
- YoungMinds www.youngminds.org
- SHOUT Text Support (Text 'SHOUT' to 85258)
- ELSA – in school
- Early Help
- (staff) counselling SLA

You can read more about our curriculum in the PSHE and RSE policies (available on our website and upon request from reception) However some examples of topics we cover include:

Being me in the World
Celebrating Differences
Dreams and goals
Healthy me
Relationships
Changing me



The school teaches about feelings, and what it means to be, and how to stay, emotionally healthy. They teach me that emotional ups and downs are normal, and also to recognise when I might need some support. They provide me with plenty of opportunities to express and explore my feelings.

7. Warning Signs

Moorlands Primary School staff may become aware of warning signs which indicate a student is experiencing emotional health or emotional wellbeing issues.

These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with the Safeguarding Team.

PHYSICAL SIGNS THAT I HAVE HURT MYSELF REPEATEDLY OR ON PURPOSE	LOSING INTEREST IN THINGS	NOT DOING AS WELL WITH MY SCHOOL WORK	CHANGES IN MY EATING OR SLEEPING HABITS
TALKING OR JOKING ABOUT HURTING MYSELF OR KILLING MYSELF	TAKING DRUGS OR ALCOHOL	SAYING BAD THINGS ABOUT MYSELF	CHANGES IN WHAT I WEAR – E.G. WEARING LONG SLEEVES IN WARM WEATHER
NOT WANTING TO BE AROUND OTHER PEOPLE	BEING SECRETIVE	NOT WANTING TO DO PE OR GETTING CHANGED SECRETIVELY	BEING LATE FOR SCHOOL OR NOT TURNING UP AT ALL
			FEELING SICK WITH NO EVIDENT CAUSE

WARNING SIGNS
THAT I MAY DISPLAY INCLUDE:



8. Responding to Disclosures

All disclosures should be recorded in writing and held on the student's confidential file.

- Date
- The name of the member of staff to whom the disclosure was made
- Main points from the conversation
- Agreed next steps
- Discuss the conversation with the Safeguarding Team

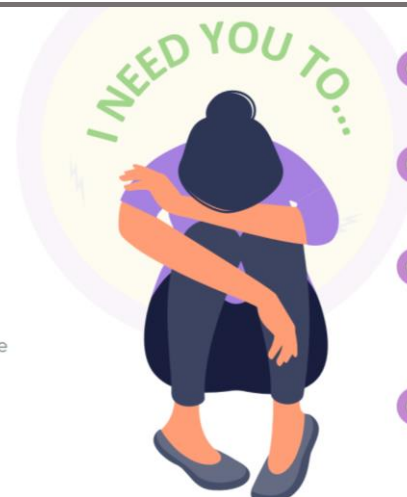
For more information about how to handle emotional health disclosures sensitively see appendix B.

▶ Listen

▶ Be calm

▶ Avoid judging me

▶ Reassure me



▶ Avoid asking Why?

▶ Ensure that I'm safe

▶ Let me know who you need to talk to, which information you need to pass on and why

▶ Let me know what is likely to happen next

9. Working with families

Where it is deemed appropriate to inform families, we need to be sensitive in our approach

Remember that my family may become upset or angry. Give them space to think, as well as telling them the different ways they can get further help and support. Leaflets or websites may be helpful. Make sure my family know what will happen next and who they can talk to at the school if they need to. You could give them a copy of this policy too.



Before disclosing to families we should consider the following questions (on a case by case basis):

- Can the meeting happen face to face? This is preferable.
- Where should the meeting happen? At Moorlands Primary School, at their home or somewhere neutral?
- Who should be present? Consider families, the student, other members of staff.
- What are the aims of the meeting?

10. Supporting peers

When a student is suffering from emotional health issues, it can be a difficult time for their friends. Friends often want to support but do not know how. In order to keep peers safe, we will consider on a case-by-case basis which friends may need additional support. All children will be made aware of support services and encouraged to share their feelings with someone they trust.

11. Training

As a minimum, all staff will receive training about recognising and responding to emotional health issues as part of their regular child protection training.

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 due to developing situations with one or more students.

It's important that all staff know how best to support me and my friends with how we are feeling. Sometimes there can be a lot of the same issue at once (self-harm for example). If this happens, the school will give staff extra training on this issue so they can offer the best support to me and my friends.



12. Mental Health

- It is our policy to ensure that emotional health and wellbeing are always prioritised and early intervention is put in place in order to support a child. However, some children will also be affected by mental health difficulties.
- Keeping Children Safe In Education 2023 makes several points about what Moorlands Primary School staff need to know about mental health. For more information about mental health, please read our Safeguarding and Child Protection Policy.

- All staff should be aware that mental health problems can, in some cases, be an indicator that a child has suffered or is at risk of suffering abuse, neglect or exploitation.
- Staff will be alert to behavioural signs that suggest a child may be experiencing a mental health problem or be at risk of developing one.
- If you have a mental health concern about a child that is also a safeguarding concern, all staff should take immediate action by reporting to the DSL.
- If staff have a mental health concern that is **not** also a safeguarding concern, they should still speak to the DSL to agree a course of action.
- Moorlands Primary School staff are not expected or trained to diagnose mental health conditions or issues and therefore should avoid doing so, or using language that suggests they are making a diagnosis. Instead, they are ideally placed to notice behaviours that may be of concern.



When I had depression, it really helped me when my teacher noticed. She knows me really well so was able to spot that I had not been myself for a while. She even noticed when I tried to put on a brave face. We talked and she was able to get me the support I needed to feel better.

13. Policy Review

This policy will be reviewed annually. It is next due for review: March 2025
This policy will always be immediately updated to reflect personnel changes.

APPENDIX A - Example Wellbeing Care Plan

Name of Moorlands Primary School/setting	
Child's Name	

Class/Group/Form	
Date of Birth	
Child's Address	
Medical Diagnosis/Condition	
Date	
Review Date/s	
Family Contact Information	
Name	
Relationship to child	
Contact Number (work)	
Contact Number (home)	
Contact Number (mobile)	
Name	
Relationship to child	
Contact Number (work)	
Contact Number (home)	
Contact Number (mobile)	
Clinic/Hospital Contact	
Name	
Contact Number	
Email Address	
GP	
Name	
Contact Number	
Who is responsible for providing support in Moorlands Primary School	
Describe medical needs and give details of child's symptoms,	

triggers, signs, treatments, facilities, equipment or devices, environmental issues etc	
Name of medication, dose, method of administration, when to be taken, side effects, contra-indications, administered by/self-administered with/without supervision	
Daily Care Requirements	
Specific support for the pupil's educational, social and emotional needs	
Arrangements for Moorlands Primary School visits/trips etc	
Other Information which may be relevant	
Describe what constitutes an emergency, and the action to take if this occurs	
Who is responsible in an emergency (state if different for off-site activities)	

Plan developed with	
Staff training needed/undertaken – who, what, when	
Form Copied to	

APPENDIX B – Talking to students when they make disclosures

The advice below is from students themselves, in their own words, together with some additional ideas to help you in initial conversations with students when they disclose emotional health concerns. This advice should be considered alongside relevant Moorlands Primary School policies on pastoral care and child protection and discussed with relevant colleagues as appropriate.


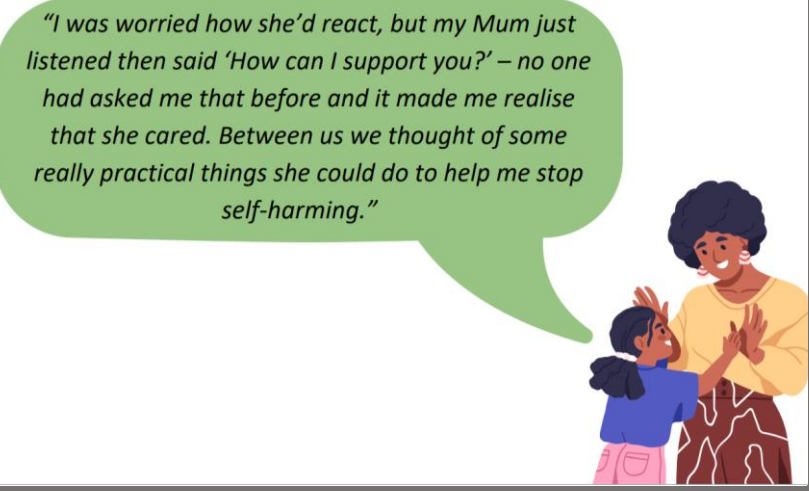
Focus on listening

"She listened, and I mean REALLY listened. She didn't interrupt me or ask me to explain myself or anything, she just let me talk and talk and talk. I had been unsure about talking to anyone but I knew quite quickly that I'd chosen the right person to talk to and that it would be a turning point."



If a student has come to you, it's because they trust you and feel a need to share their difficulties with someone. Let them talk. Ask occasional open questions if you need to in order to encourage them to keep exploring their feelings and opening up to you. Just letting them pour out what they're thinking will make a huge difference and marks a huge first step in recovery. Up until now they may not have admitted even to themselves that there is a problem.

<p>Don't talk too much</p>	 <p><i>"Sometimes it's hard to explain what's going on in my head – it doesn't make a lot of sense and I've kind of gotten used to keeping myself to myself. But just 'cos I'm struggling to find the right words doesn't mean you should help me. Just keep quiet, I'll get there in the end."</i></p>	<p>The student should be talking at least three quarters of the time. If that's not the case then you need to redress the balance. You are here to listen, not to talk. Sometimes the conversation may lapse into silence. Try not to give in to the urge to fill the gap, but rather wait until the student does so. This can often lead to them exploring their feelings more deeply. Of course, you should interject occasionally, perhaps with questions to the student to explore certain topics they've touched on more deeply, or to show that you understand and are supportive. Don't feel an urge to over-analyse the situation or try to offer answers. This all comes later. For now your role is simply one of supportive listener. So make sure you're listening!</p>
<p>Don't pretend to understand</p>	 <p><i>"I think that all teachers got taught on some course somewhere to say 'I understand how that must feel' the moment you open up. YOU DON'T – don't even pretend to, it's not helpful, it's insulting."</i></p>	<p>The concept of an emotional health difficulty such as an eating disorder or obsessive compulsive disorder (OCD) can seem completely alien if you've never experienced these difficulties first hand. You may find yourself wondering why on earth someone would do these things to themselves, but don't explore those feelings with the sufferer. Instead listen hard to what they're saying and encourage them to talk and you'll slowly start to understand what steps they might be ready to take in order to start making some changes.</p>

<p>Don't be afraid to make eye contact</p>	<p><i>"She was so disgusted by what I told her that she couldn't bear to look at me."</i></p> 	<p>It's important to try to maintain a natural level of eye contact (even if you have to think very hard about doing so and it doesn't feel natural to you at all). If you make too much eye contact, the student may interpret this as you staring at them. They may think that you are horrified about what they are saying or think they are a 'freak'. On the other hand, if you don't make eye contact at all then a student may interpret this as you being disgusted by them – to the extent that you can't bring yourself to look at them. Making an effort to maintain natural eye contact will convey a very positive message to the student.</p>
<p>Offer support</p>	<p><i>"I was worried how she'd react, but my Mum just listened then said 'How can I support you?' – no one had asked me that before and it made me realise that she cared. Between us we thought of some really practical things she could do to help me stop self-harming."</i></p> 	<p>Never leave this kind of conversation without agreeing next steps. These will be informed by your conversations with appropriate colleagues and the Moorlands Primary Schools' policies on such issues. Whatever happens, you should have some form of next steps to carry out after the conversation because this will help the student to realise that you're working with them to move things forward.</p>

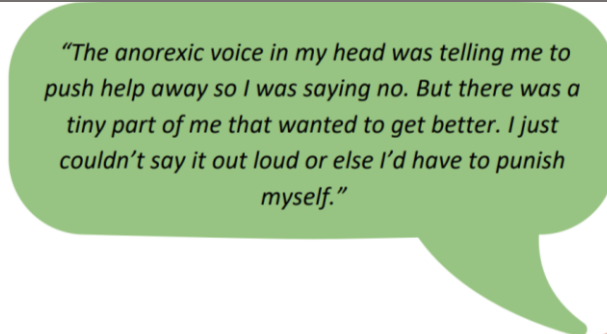
Acknowledge how hard it is to discuss these issues



“Talking about my bingeing for the first time was the hardest thing I ever did. When I was done talking, my teacher looked me in the eye and said ‘That must have been really tough’ – he was right, it was, but it meant so much that he realised what a big deal it was for me.”

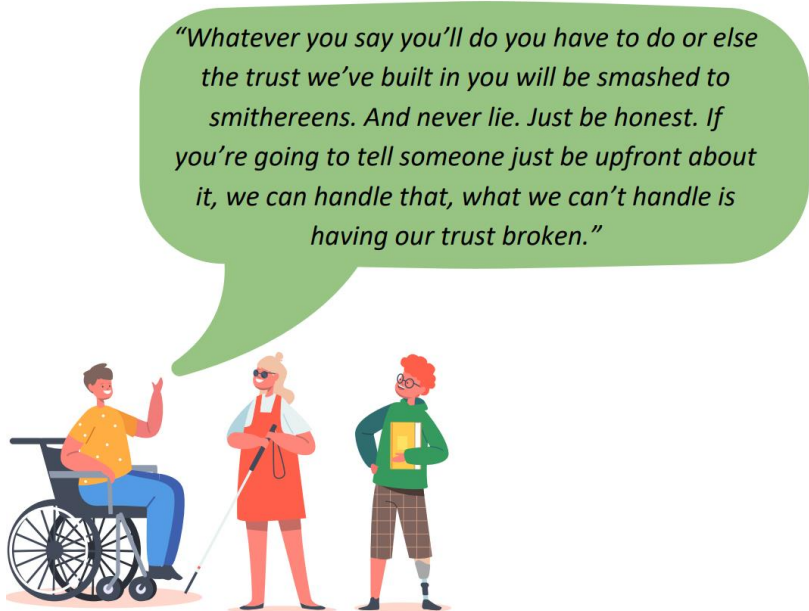
It can take a young person weeks or even months to admit they have a problem to themselves, let alone share that with anyone else. If a student chooses to confide in you, you should feel proud and privileged that they have such a high level of trust in you. Acknowledging both how brave they have been, and how glad you are they chose to speak to you, conveys positive messages of support to the student.

Don’t assume that an apparent negative response is actually a negative response



“The anorexic voice in my head was telling me to push help away so I was saying no. But there was a tiny part of me that wanted to get better. I just couldn’t say it out loud or else I’d have to punish myself.”

Despite the fact that a student has confided in you, and may even have expressed a desire to get on top of their illness, that doesn’t mean they’ll readily accept help. The illness may ensure they resist any form of help for as long as they possibly can. Don’t be offended or upset if your offers of help are met with anger, indifference or insolence, it’s the illness talking, not the student.

<p>Never break your promises</p>		<p>Above all else, a student wants to know they can trust you. That means if they want you to keep their issues confidential and you can't then you must be honest. Explain that, whilst you can't keep it a secret, you can ensure that it is handled within the Moorlands Primary School's policy of confidentiality and that only those who need to know about it in order to help will know about the situation. You can also be honest about the fact you don't have all the answers or aren't exactly sure what will happen next. Consider yourself the student's ally rather than their saviour and think about which next steps you can take together, always ensuring you follow relevant policies and consult appropriate colleagues.</p>
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APPENDIX C – Useful websites for further information

- Young Minds (www.youngminds.org.uk)
- Mind (www.mind.org.uk)
- Anna Freud National Centre for Children and Families ([www.mentallyhealthyMoorlands Primary Schools.org.uk](http://www.mentallyhealthyMoorlandsPrimarySchools.org.uk))
- Minded (www.minded.org.uk) For E-learning opportunities.

APPENDIX D – Helplines for adults and young people

Young people	<ul style="list-style-type: none"> • Childline 0800 1111
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	<ul style="list-style-type: none"> • Papyrus (Suicide Prevention) 0800 0684141 • Young Minds Crisis Messenger Text YM to 85258
Adults	<ul style="list-style-type: none"> • Samaritans116 123 • Papyrus (Suicide Prevention for under 35s) 0800 0684141 • SHOUT text SHOUT to 85258

APPENDIX E – Information and Guidance on specific mental health presentations

Mental Health Presentation	Resources
Self-Harm	<p>Websites: Online support SelfHarm.co.uk: www.selfharm.co.uk National Self-Harm Network: www.nshn.co.uk</p> <p>Books: Pooky Knightsmith (2015) Self-Harm and Eating Disorders in Moorlands Primary Schools: A Guide to Whole Moorlands Primary School Support and Practical Strategies. London: Jessica Kingsley Publishers Keith Hawton and Karen Rodham (2006) By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents. London: Jessica Kingsley Publishers Carol Fitzpatrick (2012) A Short Introduction to Understanding and Supporting Children and Young People Who Self-Harm. London: Jessica Kingsley Publishers</p>
Depression	<p>Website: www.depressionalliance.org</p> <p>Books: Christopher Dowrick and Susan Martin (2015) Can I Tell you about Depression?: A guide for friends, family and professionals. London: Jessica Kingsley Publishers</p>
Anxiety, Panic attacks and Phobias	<p>Websites: www.anxietyuk.org.uk</p> <p>Books:</p>

	<p>Lucy Willetts and Polly Waite (2014) Can I Tell you about Anxiety?: A guide for friends, family and professionals. London: Jessica Kingsley Publishers</p> <p>Carol Fitzpatrick (2015) A Short Introduction to Helping Young People Manage Anxiety. London: Jessica Kingsley Publishers</p>
Obsessions and Compulsions	<p>Websites: www.ocduk.org/ocd</p> <p>Books: Amita Jassi and Sarah Hull (2013) Can I Tell you about OCD?: A guide for friends, family and professionals. London: Jessica Kingsley Publishers</p> <p>Susan Conners (2011) The Tourette Syndrome & OCD Checklist: A practical reference for families and teachers. San Francisco: Jossey-Bass</p>
Suicidal Ideation	<p>Websites: www.papyrus-uk.org www.nspcc.org.uk/preventingabuse/research-and-resources/on-the-edge-childline-spotlight/</p> <p>Books: Keith Hawton and Karen Rodham (2006) By Their Own Young Hand: Deliberate Self-harm and Suicidal Ideas in Adolescents. London: Jessica Kingsley Publishers</p> <p>Terri A.Erbacher, Jonathan B. Singer and Scott Poland (2015) Suicide in Moorlands Primary Schools: A Practitioner’s Guide to Multi-level Prevention, Assessment, Intervention, and Postvention. New York: Routledge</p>
Disordered Eating	<p>Websites: www.b-eat.co.uk/about-eating-disorders www.inourhands.com/eatingdifficulties-in-younger-children</p> <p>Books: Bryan Lask and Lucy Watson (2014) Can I tell you about Eating Disorders?: A Guide for Friends, Family and Professionals. London: Jessica Kingsley Publishers</p> <p>Pooky Knightsmith (2015) Self-Harm and Eating Disorders in Moorlands Primary Schools: A Guide to Whole Moorlands Primary School Support and Practical Strategies. London: Jessica Kingsley Publishers</p> <p>Pooky Knightsmith (2012) Eating Disorders Pocketbook. Teachers’ Pocketbooks</p>

APPENDIX F – Guidance and advice documents

- Promoting and supporting mental health and wellbeing in Moorlands Primary Schools and colleges. Department for Education (June 2021)
- Mental health and behaviour in Moorlands Primary Schools - departmental advice for Moorlands Primary School staff. Department for Education (November 2018)
- Mental health and wellbeing provision in Moorlands Primary Schools. Department for Education (October 2018)
- Teacher guidance: teaching about mental health and emotional wellbeing. PSHE Association guidance funded by the Department for Education (2019)
- Keeping children safe in education - statutory guidance for Moorlands Primary Schools and colleges. Department for Education (2023)
- NICE guidance on social and emotional wellbeing in primary education
- NICE guidance on social and emotional wellbeing in secondary education
- What works in promoting social and emotional wellbeing and responding to emotional health problems in Moorlands Primary Schools? Advice for Moorlands Primary Schools and framework document written by Professor Katherine Weare. National Children's Bureau (2015)

