



Pupil Mental Health and Wellbeing Policy

Document Provenance	
Approver:	Board of Trustees
Date Approved:	26 March 2026
Effective From:	26 March 2026
Date of Next Review:	March 2027
Executive Leadership Team (ELT) Owner:	National Director of Inclusion

Unless there are legislative or regulatory changes in the interim, this policy will be reviewed annually. Should no substantive changes be required at that point, the policy will move to the next review cycle.

Version Control		
Version	Date	Changes
1.0	26/03/2026	In-cycle policy review and re-approval

Policy Summary:

This policy outlines how E-ACT Academies will work to promote the positive mental health and wellbeing of all pupils to enable them to flourish.

Academy Mental Health Lead: Amanda Powell

Related Documents:

- Staff Mental Health and Wellbeing Policy
- Equality and Diversity Policy
- Attendance Policy
- Behaviour Policy
- Relationship and Health Education (RHE) Policy – Primary
- Relationship, Sex and Health Education (RSE) Policy – Secondary
- Safeguarding and Child Protection Policy
- Special Educational Needs and Disabilities (SEND) and Learning Policy
- Supporting Pupils with Medical Needs Policy

Contents

	Page
1. Introduction and purpose	2
2. Legislation and guidance	2
3. Responsibilities	4
4. Teaching about mental health and emotional wellbeing	4
5. Identifying needs and warning signs	5
6. Mental health issues	7
7. Managing disclosures	8
8. Targeted support	8
9. Pupil support plans and health care plans	8
10. Working in partnership with parents/carers	9
11. Signposting	9
12. Working with external agencies and partners	9
13. Training	10
14. Success factors	10
15. Useful websites	10
16. Monitoring arrangements	10
Appendix 1: Whole school approach to mental health and wellbeing	11
Appendix 2: Academy specific arrangements	12

1. Introduction and purpose

- 1.1 This policy makes clear the academy's commitment to supporting the mental health and emotional wellbeing of pupils.
- 1.2 We recognise that children and young people's mental health is a crucial factor in their overall wellbeing and can affect their learning and achievement. All children and young people move up and down the mental health continuum during their educational journey. However, some face significant life events which can seriously impact their emotional wellbeing and can include mental illness.
- 1.3 The Department for Education (DfE) recognises that: "Good mental health and wellbeing improves standards in schools and helps pupils achieve and thrive in education, setting them up well for life and work". Promoting and Supporting Mental Health and Wellbeing in Schools and Colleges (2025).
- 1.4 Schools can be a place for all pupils to experience a nurturing and supportive environment that has the potential to develop self-esteem and give positive experiences for overcoming adversity and building resilience. Schools are also a place of respite from difficult home lives and offers, positive role models and relationships, which are critical in promoting the wellbeing of all young people.
- 1.5 The role of the academy is to ensure that pupils are able to manage times of change and stress, and that they are supported to reach their potential or access help when they need it. We have a role to ensure that pupils learn about what they can do to maintain positive mental health, what affects their mental health, how they can help reduce the stigma surrounding mental health issues, and where they can go if they need help and support. The academy takes the view that positive mental health is everybody's business and that everyone has a role to play.
- 1.6 Each academy adopts a whole-school approach to mental health and wellbeing. It is schools that helps pupils to flourish, learn, and succeed by providing opportunities for them and the adults around them to develop coping skills and the resilience to manage the challenges that they are experiencing. The academy takes a graduated approach and effective response to meeting pupils' needs (Appendix 1).
- 1.7 The aim of this policy is to:
 - Ensure that pupils feel valued
 - To ensure pupils have a sense of belonging and feel safe
 - Help pupils better understand their emotions and feelings.
 - Help pupils feel comfortable sharing any concerns or worries.
 - Help pupils socially to form and maintain relationships.
 - Promote self-esteem and ensure pupils know that they count.
 - Encourage pupils to be confident and celebrate differences.
 - Help pupils to develop emotional resilience and manage setbacks.
 - Support the mission, vision and values of the trust and its establishments

2. Legislation and guidance

- 2.1 This policy has been developed with due regard to the following legislation, statutory guidance, and non-statutory guidance, which underpin schools' duties to safeguard and promote the mental health and wellbeing of children and young people:

- Keeping Children Safe in Education (DfE, 2025)
This policy recognises 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. Concerns relating to self-harm, suicidal ideation, emotional distress, or mental ill health are treated as safeguarding matters and are responded to in line with the academy's safeguarding procedures.
- Promoting and Supporting Mental Health and Wellbeing in Schools and Colleges (DfE, updated 2025)
This policy reflects the expectation that schools adopt a whole-school approach to mental health and wellbeing, supported by strong leadership, staff training, effective early identification, and appropriate targeted support.
- Relationships Education, Relationships and Sex Education (RSE) and Health Education (DfE, statutory guidance)
Including statutory requirements for teaching about mental wellbeing, emotional literacy, resilience, and how and where to seek help, delivered through the PSHE / RSHE curriculum in an age-appropriate and sensitive manner.
- The Children Act 1989 and The Children Act 2004
Which place a duty on schools to safeguard and promote the welfare of children.
- The Equality Act 2010
Including duties to eliminate discrimination, advance equality of opportunity and foster good relations, recognising that mental health difficulties may constitute a disability and require reasonable adjustments.
- The Special Educational Needs and Disability (SEND) Code of Practice: 0–25 years
This policy aligns with the graduated response to meeting need and recognises the intersection between mental health, SEND, and barriers to learning.
- The Data Protection Act 2018 and UK GDPR
Personal data relating to mental health and wellbeing is processed lawfully, proportionately, and securely. Where there are safeguarding concerns, information may be shared without consent in accordance with statutory safeguarding guidance and information-sharing principles.
- The UN Convention on the Rights of the Child (UNCRC)
In particular:
 - Article 3 – the best interests of the child
 - Article 12 – the right of children to be heard
 - Article 23 – the rights of children with disabilities
- Relationships, Sex and Health Education (RSHE) (DfE, July 2025; compulsory from 1 September 2026)
The academy will implement the updated RSHE requirements by September 2026, including strengthened content on mental wellbeing (e.g., grief, loss, loneliness), online safety and digital harms, and a new Personal Safety strand; we may adopt elements sooner where staff are prepared and trained.

Promoting and supporting mental health and wellbeing in schools and colleges (DfE, 14 July 2025)

Our whole-school approach follows the DfE's 8 principles (leadership, ethos and environment, staff development, curriculum, pupil voice, identification/monitoring, targeted support/referral, and work with parents/carers).

3. Responsibilities

- 3.1 The Board of Trustees has strategic oversight of this policy and is responsible for ensuring that the Trust meets its statutory duties in relation to safeguarding and promoting the wellbeing of pupils.
- 3.2 The Headteacher is responsible for the implementation of this policy at academy level and for ensuring that a whole-school approach to mental health and wellbeing is embedded in practice.
- 3.3 The Designated Safeguarding Lead has operational responsibility for responding to safeguarding concerns arising from mental health and emotional wellbeing and for ensuring that appropriate procedures are followed.
- 3.4 The senior leadership team within each academy is responsible for the day-to-day leadership and fair application of this policy. All staff have a responsibility to promote positive mental health, identify concerns early and follow the academy's safeguarding procedures.

Key Responsibilities

- 3.5 The academy has a responsibility to ensure that:
 - The E-ACT values of thing big, show team spirit and doing the right thing are promoted, and a sense of belonging is encouraged
 - Pupil voice is promoted, including opportunities for pupils to participate in decision-making
 - Pupils have access to the appropriate support that meets their needs
 - Academic and pastoral achievements are celebrated
 - Pupils have opportunities to develop a sense of worth by ensuring they take responsibility for themselves and others
 - Pupils have the opportunity to reflect on challenging situations
 - There is a named Designated Lead for Mental Health and Emotional Wellbeing
- 3.6 Although all members of staff have a responsibility to promote the mental health of pupils, the following staff have a specific leadership role in this area:
 - Headteacher
 - Designated Safeguarding Lead
 - Senior Mental Health Lead
 - Attendance Lead
 - Personal Development Curriculum Lead
 - Special Educational Needs and Disabilities Co-ordinator (SENDCO)

4. Teaching about mental health and emotional wellbeing

- 4.1 All pupils are taught about mental health and emotional well-being. The skills, knowledge and understanding needed by pupils to keep themselves mentally healthy and safe will be an integral part of the Personal, Social and Health Education (PSHE) curriculum. Current DfE guidance can be found [here](#).
- 4.2 The specific needs of pupils and their age is taken into consideration when delivering health education. The specific content of lessons will be determined by how old the pupils are and the

specific needs of pupils to ensure the content is appropriate. The PSHE Association Guidance will be used to ensure that mental health and emotional wellbeing issues are taught in a safe and sensitive way.

Teaching about mental health, wellbeing and safety (RSHE 2026)

- 4.3 From 1 September 2026, the academy's RSHE curriculum will reflect the updated statutory guidance in full. Teaching will be age-appropriate, inclusive and sequenced, and will cover the following mandatory areas:
- **Mental wellbeing (strengthened content):** emotional literacy; strategies for self-care and regulation; recognising and seeking help for poor mental health; grief, loss and bereavement; loneliness and connection; sleep, physical activity and routines; and reducing stigma.
 - **Online safety and digital mental health risks:** critical engagement with online content; recognising misinformation/disinformation, harmful influencers and toxic subcultures; gaming monetisation, scams/fraud and other financial harms; image-based risks and pressure; and how digital experiences can impact wellbeing.
 - **Personal Safety:** recognising and managing risk in public spaces, including road, rail and water safety, with links to decision-making, help-seeking and bystander responsibilities.
 - **Relationships and respectful behaviour:** addressing misogyny and violence against women and girls, consent and boundaries (age-appropriate), and kindness and respect online/offline.
- 4.4 Delivery will draw on evidence-informed materials (e.g., PSHE Association guidance) and safe-practice protocols for sensitive topics. Staff will create safe classroom climates, use agreed ground rules, manage questions safely, and signpost support. Parents/carers will be informed about programme content and how to discuss topics at home.

5. Identifying needs and warning signs

- 5.1 All staff will be trained in how to recognise warning signs of common mental health problems. The pastoral team will regularly assess all pupils using a variety of sources.
- 5.2 Staff may also become aware of warning signs, which indicate a pupil is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously.

Curriculum-informed early identification

- 5.3 Learning from RSHE (e.g., grief/loss, loneliness, online pressures, scams and digital exploitation) will inform our early identification of pupils who may be at risk of poor mental health. Staff will use curriculum touchpoints to normalise help seeking and to make timely referrals to internal support or external agencies where appropriate.

Attendance and mental health

- 5.4 Staff recognise the strong and reciprocal relationship between attendance and mental health and wellbeing. Persistent absence, patterns of lateness, or changes in attendance can be early indicators of emotional distress, anxiety, or emerging mental health needs. Attendance data is therefore used as part of the academy's early identification processes and is triangulated alongside pastoral information, pupil voice and safeguarding concerns.
- 5.5 Where concerns are identified, leaders will work collaboratively with pupils, families and relevant professionals to understand underlying barriers to attendance and to implement appropriate support through a graduated response. Attendance is viewed not solely as a compliance issue, but as a safeguarding and wellbeing priority, ensuring that pupils are supported to access education safely and successfully.

Emotionally Based School Avoidance (EBSA)

- 5.6 Staff recognise Emotionally Based School Avoidance (EBSA) as a complex presentation often linked to anxiety, trauma, unmet special educational needs, or other mental health difficulties. EBSA is understood as a wellbeing concern rather than a behavioural issue and is responded to through a supportive, child-centred approach.
- 5.7 Where EBSA is identified or suspected, staff and leaders will work closely with the pupil, parents/carers and relevant professionals to develop an individualised support plan. This may include reasonable adjustments, phased reintegration, therapeutic support, and close monitoring of wellbeing and attendance. All responses to EBSA are informed by safeguarding principles and aligned with the academy's attendance, SEND and mental health frameworks.

Online harm and digital mental health risks

- 5.8 Staff and leaders recognise that online activity and digital environments can have a significant impact on pupils' mental health and emotional wellbeing. This includes, but is not limited to, exposure to harmful content, online bullying, social media pressures, digital self-harm, and content that may exacerbate anxiety, low self-esteem or self-harm behaviours.
- 5.9 In line with the updated 2026 RSHE statutory guidance, the academy recognises the widening range of online risks that can impact pupils' mental health and wellbeing. This includes exposure to AI generated or manipulated sexual images (deepfakes), harmful influencers promoting misogynistic or violent ideologies, online communities that normalise sexual harassment or incel related content, digital financial harms such as gaming monetisation and scams, and other forms of online manipulation. The academy will address these risks explicitly through the curriculum and safeguarding procedures, ensuring pupils develop the critical digital literacy skills needed to engage safely and responsibly online.
- 5.10 Concerns relating to online harm are treated as safeguarding matters and are responded to in line with the academy's safeguarding and online safety procedures. Staff remain vigilant to the ways in which online experiences may present as emotional distress, changes in behaviour, self-harm or withdrawal, and work closely with safeguarding leads to ensure pupils receive timely and appropriate support. Education about online safety and digital resilience is embedded within the curriculum and wider school culture, supporting pupils to navigate online spaces safely and seek help when needed.
- 5.11 Staff observing any of these warning signs should communicate their concerns with the Designated Safeguarding Lead or the Senior Mental Health Lead as appropriate. It will be crucial for both leads to work together to ensure that the support offered to the pupil is holistic and that the recording of the support is robust and logged on CPOMs.

Warning signs

- 5.12 Warning signs may include (not an exhaustive list):
- Changes in behaviour
 - Changes in activity and mood
 - Changes in eating/sleeping habits
 - Becoming socially withdrawn
 - Talking or joking about self-harm or suicide
 - Expressing feelings of failure, uselessness, or loss of hope
 - Repeated physical pain or nausea with no evident cause
 - An increase in lateness or absenteeism

6. Mental health issues

Self-harm

6.1 Self-harm refers to any behaviour in which a young person intentionally inflicts harm upon themselves as a means of coping with overwhelming thoughts, feelings, or experiences. Among adolescents, this behaviour most commonly manifests as cutting, burning, or non-lethal overdoses. In contrast, younger children and those with special needs are more likely to engage in behaviours such as picking or scratching at wounds, pulling out their hair, or causing bruises through banging or other means.

Anxiety, panic attacks and phobias

6.2 Anxiety, panic attacks, and phobias can manifest in various forms among children and young people. While it is normal for everyone to experience low levels of anxiety as part of everyday life, persistent thoughts of anxiety, fear, or panic over several weeks or months, especially when they begin to interfere with a young person's ability to engage in or enjoy daily activities, requires intervention.

Depression

6.3 While fluctuations in mood are a normal aspect of life, individuals suffering from depression may experience these highs and lows more intensely. Persistent feelings of failure, hopelessness, numbness, or sadness can permeate their daily lives over weeks or months, significantly affecting their behaviour, as well as their ability and motivation to participate in everyday activities.

Obsessions and compulsions

6.4 Obsessions refer to intrusive and distressing thoughts or feelings that disrupt an individual's mental state. Compulsions are the behaviours performed to alleviate these thoughts or feelings. For instance, a young person might constantly fear that their house will burn down if they do not turn off all switches before leaving. In response, they may repeatedly check the switches, even returning home multiple times to ensure they are off. Obsessive-compulsive disorder (OCD) can manifest in various ways and is not limited to cleaning and checking behaviours.

Eating problems

6.5 Food, weight, and body shape can serve as mechanisms for coping with or expressing challenging thoughts, feelings, and behaviours that young people encounter daily. Some may develop eating disorders such as anorexia (characterised by restricted food intake), binge eating disorder, or bulimia nervosa (marked by cycles of bingeing and purging). Additionally, younger children, particularly those in primary or preschool age, may exhibit problematic behaviours around food, such as refusing to eat in specific situations or with certain individuals. These behaviours can be a means of conveying messages that the child lacks the verbal ability to express.

Sexual Harassment, Online Sexual Content & Harmful Stereotypes

6.6 The academy recognises updated statutory definitions of sexual harassment and online sexual content, including exposure to unwanted sexualised imagery, coercive messaging, stalking behaviours, and the normalisation of harmful gender-based stereotypes. Staff will challenge all forms of sexual harassment, including those influenced by online misogyny or harmful online subcultures, and will support pupils to recognise, report and seek help for any behaviour that impacts their emotional wellbeing or safety.

Suicidal feelings

6.7 Young people may experience complicated thoughts and feelings about wanting to end their own lives. Some young people never act on these feelings though they may openly discuss and explore them, while other young people die suddenly from suicide apparently unexpectedly.

- 6.8 Teaching and support relating to suicide and self-harm will follow evidence-based approaches, in accordance with the 2026 RSHE statutory guidance. Staff will receive appropriate training before delivering any content linked to suicide prevention. All teaching will prioritise pupil safety, avoid content that may inadvertently cause distress or escalate risk, and ensure pupils know how to seek immediate help for themselves or others.

7. Managing disclosures

- 7.1 If a pupil makes a disclosure about themselves or a peer to a member of staff, staff will remain calm, non-judgmental and reassuring.
- 7.2 Staff will focus on the pupil's emotional and physical safety, rather than trying to find out why they are feeling that way or offering advice.
- 7.3 If a pupil makes a disclosure, staff must follow the academy's safeguarding 'reporting a disclosure' procedure and inform the Designated Safeguarding Lead. All disclosures are recorded and stored in the pupil's confidential child protection file on CPOMS.
- 7.4 When making a record of a disclosure, staff will include:
- The full name of the member of staff who is making the record
 - The full name of the pupil(s) involved
 - The date, time and location of the disclosure
 - The context in which the disclosure was made
 - Any questions asked or support offered by the member of staff
- 7.5 The academy's safeguarding procedures will then be followed robustly to ensure the pupil is supported and safe.

8. Targeted support

- 8.1 The academy will make use of resources to assess and track wellbeing as appropriate. Support through targeted approaches for individual pupils or groups of pupils may include (not an exhaustive list):
- The targeted use of specific resources such as a Pastoral Support Plan (PSP)
 - Strengths and difficulties questionnaires
 - Mood diaries
 - 1:1 mentoring or counselling
 - Bereavement support
 - Group activities
 - Therapeutic activities including art, Lego, relaxation, and mindfulness techniques
 - Boxall profiling
 - Early Help assessments

9. Pupil support plans and health care plans

- 9.1 Personal Support Plans are put in place for all pupils receiving targeted support for mental health and emotional wellbeing. These are created by the Senior Mental Health Lead together with the most appropriate leads listed above in this policy. Where PSPs are needed for SEND pupils, the SENCO will always be involved.
- 9.2 Both the plan and support will be recorded on CPOMs and progress will be monitored.

- 9.3 Where a pupil has a diagnosed medical or mental health condition that requires ongoing medical support in school, an Individual Healthcare Plan will be put in place in line with the Supporting Pupils with Medical Conditions policy. Where a diagnosis does not require medical provision in school, needs will be met through appropriate pastoral, SEND or targeted mental health support.

10. Working in partnership with parents/carers

- 10.1 To support parents/carers, the academy will:
- Ensure that all parents/carers are aware of a key contact in school who they can talk to and share any concerns about their child
 - Make the Mental Health and Emotional Wellbeing Policy easily accessible to parents/carers
 - Share ideas about how parents/carers can support positive mental health at home with their child or children.
 - Keep parents/carers informed about the mental health topics their child or children are learning about in school and share ideas for extending and exploring them learning at home.
 - Signpost parents/carers to external agencies who can provide additional mental health support.
- 10.2 The academy is committed to transparency in line with the 2026 RSHE statutory guidance. Parents and carers will be consulted when RSHE related policies are reviewed and will be provided with access to a representative sample of teaching materials upon request. The academy will not use any external resources or providers whose materials cannot legally or contractually be shared with parents. Engagement with parents will be constructive, responsive, and aimed at ensuring clarity about statutory content while supporting pupils' wellbeing and safeguarding.

11. Signposting

- 11.1 The Referrals to external support services will be undertaken in collaboration with parents/carers where appropriate.
- 11.2 Leaders will ensure that staff, pupils, and parents/carers are aware of what support is available within school and how to access further support.
- 11.3 Leaders will share information via various methods of communication including the academy website and appropriate social media accounts.

12. Working with external agencies and partners

- 12.1 As part of the targeted provision, the academy will work with other agencies to support pupils' mental health and emotional wellbeing including:
- The school nurse service
 - Mental health support teams
 - Educational psychology services
 - Behaviour support
 - Paediatricians
 - CAMHS (Child and Adolescent Mental Health Service)
 - Counselling services
 - Family support workers
 - Social Care

13. Training

- 13.1 Through regular child protection training, all staff will receive emotional wellbeing training and will be able to recognise and respond to mental health issues to keep pupils safe.
- 13.2 Training opportunities for staff requiring more in-depth knowledge will be evaluated during the performance appraisal process. Furthermore, additional Continuing Professional Development (CPD) will be supported throughout the year as necessary, in response to evolving situations involving one or more pupils.

RSHE 2026 training

- 13.3 All relevant staff (including RSHE/PSHE leads, form tutors and safeguarding staff) will receive targeted CPD on the updated RSHE content, safe delivery of sensitive topics (e.g., bereavement, self-harm, VAWG), and assessment of learning. Training will include digital harms and financial exploitation online, in line with the 2025 update.

14. Success factors

- 14.1 Success will be measured in following ways:
- All staff will know and understand their responsibility within the whole-school approach to mental health and emotional wellbeing
 - All staff will have confidence in their own skills when dealing with pupils' emotional issues
 - Mental health and emotional wellbeing will be seen as critical to everyone's success within the school
 - Pupils will have a language of resilience and mental health and wellbeing
 - Pupils will be supported appropriately and in a timely manner
 - Parents and carers will be aware of the roles and support available within the school

15. Useful websites

- 15.1 The following websites provide online guidance and support:
- Anxiety UK: www.anxietyuk.org.uk
 - OCD UK: www.ocduk.org
 - Eating Disorders: www.b-eat.co.uk and www.inourhands.com
 - National Self-Harm Network: www.nshn.co.uk www.selfharm.co.uk
 - Suicidal thoughts Prevention of young suicide UK – PAPHYRUS: www.papyrusuk.org
 - www.youngminds.org.uk champions young people's mental health and wellbeing
 - www.mind.org.uk advice and support on mental health problems
 - www.minded.org.uk (e-learning)
 - www.time-to-change.org.uk tackles the stigma of mental health
 - www.rethink.org challenges attitudes towards mental health

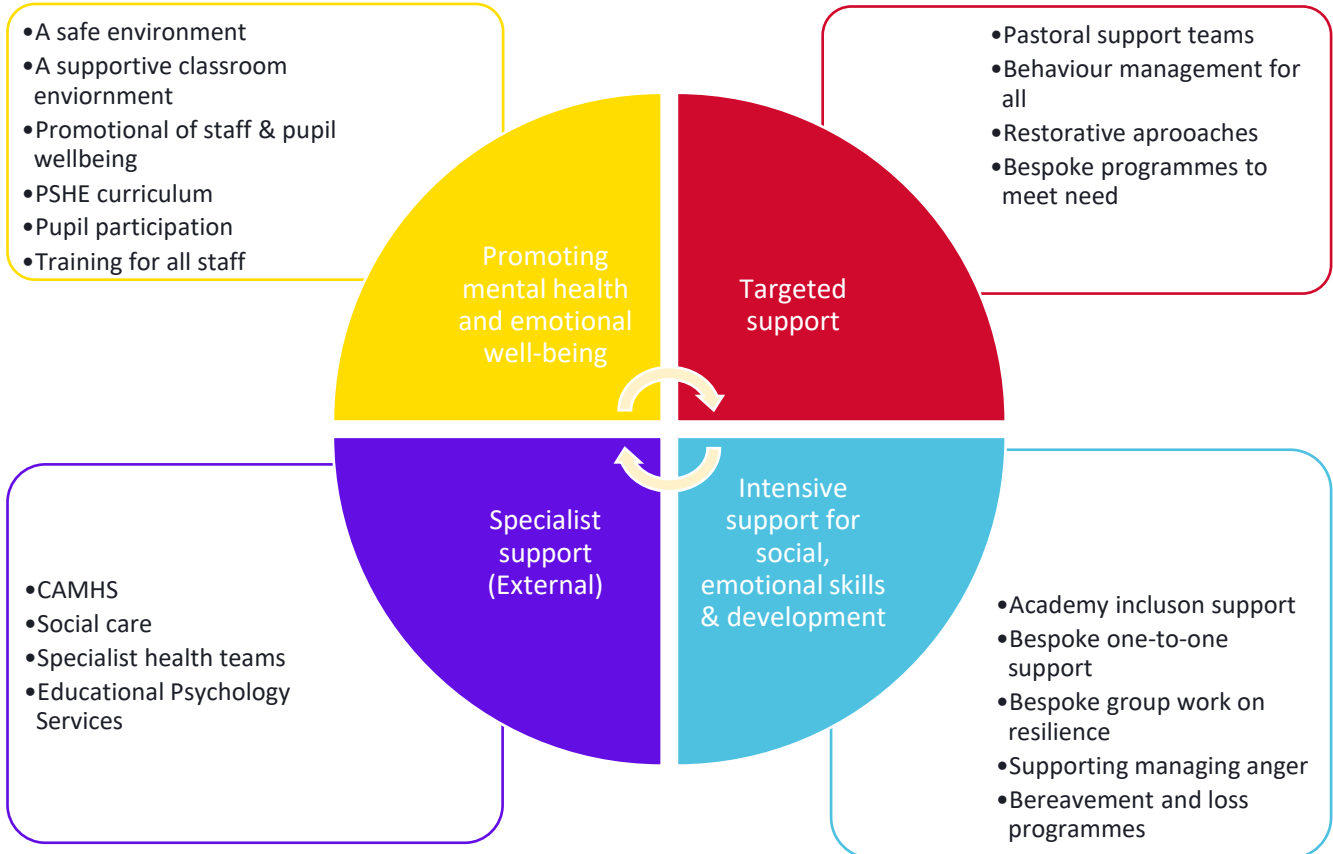
16. Monitoring arrangements

- 16.1 This policy will be reviewed every year. At every review, the policy will be approved by the Board of Trustees.

APPENDIX 1

Whole school approach to mental health and wellbeing

The diagram below highlights a graduated and effective response to meeting pupils' needs:



APPENDIX 2

Academy specific arrangements

Whole school approach to promoting mental health awareness

1) Mental health is taught in PSHE

Intent Statement for Social, Emotional and Mental Health (SEMH)

“Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community.” World Health Organisation, 2018

E-ACT Ousedale School is passionate about making a difference to the lives of young people; we have built an extensive range of early help interventions to support pupils with their wellbeing and promote positive mental health. We believe in teamwork; working with teachers and colleagues across the school, with the wider school community and most importantly with the young people in our school.

We act with determination to ensure that the wellbeing of the young people in our school community is supported. We are committed to making a difference, reflected through the school vision of ‘Be Kind, Work Hard and Succeed together’ which is embedded in the knowledge, character and experiences curriculum.

Supporting Positive Mental Health means that the young person stays at the centre of every conversation, and we prioritise those who need our help most, but promote positive mental health with everyone. Social, emotional and mental health awareness is embedded across the curriculum including PSHE, where young people are taught skills to build resilience and manage everyday stressors. We also recognise the importance of Staff wellbeing, resilience and mental health being as a key focus.

To ensure best practice, we conduct robust staff training in Safeguarding, behaviour, SEMH, attendance and safeguarding policies and protocols. The interventions mapped out are monitored and adjusted where necessary. All staff have training and the option of supervision to effectively support student SEMH.

We follow the PSHE Association Guidance teaching mental health and emotional wellbeing.

Pupils are taught to:

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

For more information, see our PSHE curriculum overview [[PSHE Curriculum Overview- whole school](#)].

2) Creating a positive atmosphere around mental health

Staff will create an open culture around mental health by:

- Discussing mental health with pupils in order to break down stigma
- Encouraging pupils to disclose when their mental health is deteriorating

3) Baseline support for all pupils

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

As documented in the attached SEMH Intervention map. Our 'Universal Offer' of support includes:
[\[SEMH Intervention Map\]](#)

- Raising awareness of mental health during assemblies, tutor time, PSHE and mental health awareness week
- External company workshops
- Signposting online support on our school website
- Having open discussions about mental health during lessons
- Pupil voice is collated and used to inform support, including the School Wide completion of The Learner Happiness Survey.
- Monitoring all pupils' mental health through assessments, e.g. a strengths and difficulties questionnaire
- Appointing a senior mental health lead with a strategic oversight of our whole school approach to mental health and wellbeing
- Offering pastoral support, e.g. through Pastoral and Academic Leaders and the wider Pastoral Support Team