



# Mulgrave Primary School

*Learn | Believe | Succeed*

Name of Policy	SEMH Policy
Frequency of review	Biennial
Agreed Date	January 2025
Review Date	January 2027

## Rationale

This policy outlines the framework for Mulgrave to meet its duty in providing and ensuring a high quality of education to all of its pupils, including pupils with social, emotional and mental health (SEMH) difficulties, and to do everything it can to meet the needs of pupils with SEMH difficulties.

Through successful implementation of this policy, we aim to:

- Promote a positive outlook regarding pupils with SEMH difficulties.
- Eliminate prejudice towards pupils with SEMH difficulties.
- Promote equal opportunities for pupils with SEMH difficulties.
- Ensure all pupils with SEMH difficulties are identified and appropriately supported.

We will work with the LA with regards to the following:

- The involvement of pupils and their parents in decision-making
- The early identification of pupils' needs
- Collaboration between education, health and social care services to provide support when required
- Greater choice and control for pupils and their parents over their support

## Legal framework

This policy has due regard to all relevant legislation and statutory guidance including, but not limited to, the following:

- Children and Families Act 2014
- Health and Social Care Act 2012
- Equality Act 2010
- Education Act 2002
- Mental Capacity Act 2005
- Children Act 1989

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

- Promoting and Supporting Mental Health and Wellbeing in Schools and Colleges Guidance 2021 (updated January 2025)
- DfE (2018) 'Mental health and behaviour in schools'
- DfE (2016) 'Counselling in schools: a blueprint for the future'
- DfE (2015) 'Special educational needs and disabilities code of practice: 0 to 25'
- DfE (2018) Mental health and wellbeing provision in schools
- DfE (2022) Promoting and supporting mental health and wellbeing in schools and colleges.

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

- Child Protection and Safeguarding Policy
- SEND Policy
- Behaviour Policy

- Supporting Pupils with Medical Conditions Policy
- Staff Code of Conduct
- Administering Medication Policy

Some SEMH needs

Anxiety: Anxiety refers to feeling fearful or panicked, breathless, tense, fidgety, sick, irritable, tearful or having difficulty sleeping. Anxiety can significantly affect a pupil's ability to develop, learn or sustain and maintain friendships. Specialists reference the following diagnostic categories:

- Generalised anxiety disorder: This is a long-term condition which causes people to feel anxious about a wide range of situations and issues, rather than one specific event.
- Panic disorder: This is a condition in which people have recurring and regular panic attacks, often for no obvious reason.
- Obsessive-compulsive disorder (OCD): This is a mental health condition where a person has obsessive thoughts (unwanted, unpleasant thoughts, images or urges that repeatedly enter their mind, causing them anxiety) and compulsions (repetitive behaviour or mental acts that they feel they must carry out to try to prevent an obsession coming true

Specific phobias: This is the excessive fear of an object or a situation, to the extent that it causes an anxious response such as a panic attack (e.g. school phobia).

- Separation anxiety disorder: This disorder involves worrying about being away from home, or about being far away from parents, at a level that is much more severe than normal for a pupil's age.
- Social phobia: This is an intense fear of social or performance situations.
- Agoraphobia: This refers to a fear of being in situations where escape might be difficult or help would be unavailable if things go wrong.

Depression: Depression refers to feeling excessively low or sad. Depression can significantly affect a pupil's ability to develop, learn or maintain and sustain friendships. Depression can often lead to other issues such as behavioural problems. Generally, a diagnosis of depression will refer to one of the following:

- Major depressive disorder (MDD): A pupil with MDD will show a number of depressive symptoms to the extent that they impair work, social or personal functioning.
- Dysthymic disorder: This is less severe than MDD and characterised by a pupil experiencing a daily depressed mood for at least two years.

Hyperkinetic disorders: Hyperkinetic disorders refer to a pupil who is excessively easily distracted, impulsive or inattentive. If a pupil is diagnosed with a hyperkinetic disorder, it will be one of the following:

- Attention deficit hyperactivity disorder (ADHD): This has three characteristic types of behaviour: inattention, hyperactivity and impulsivity. While some children show the signs of all three characteristics, which is called 'combined type ADHD', other children diagnosed show signs of only inattention, hyperactivity or impulsiveness.
- Hyperkinetic disorder: This is a more restrictive diagnosis but is broadly similar to severe combined type ADHD, in that signs of inattention, hyperactivity and impulsiveness must all be present. The core symptoms must also have been present from before the age of seven, and must be evident in two or more settings, e.g. at school and home.

Attachment disorders: Attachment disorders refer to the excessive distress experienced when a child is separated from a special person in their life, like a parent. Pupils suffering from attachment disorders can struggle to make secure attachments with peers. Researchers generally agree that there are four main factors that influence attachment disorders, these are:

- Opportunity to establish a close relationship with a primary caregiver.

- The quality of caregiving.
- The child's characteristics.
- Family context.

Eating disorders: Eating disorders are serious mental illnesses which affect an individual's relationship with food. Eating disorders often emerge when worries about weight begin to dominate a person's life.

Substance misuse: Substance misuse is the usage of harmful substances, e.g. drugs and alcohol.

Deliberate self-harm: Deliberate self-harm is a person intentionally inflicting physical pain upon themselves.

Post-traumatic stress: Post-traumatic stress is recurring trauma due to experiencing or witnessing something deeply shocking or disturbing. If symptoms persist, a person can develop post-traumatic stress disorder.

## Roles and responsibilities

The school's leadership as a whole is responsible for:

- Preventing mental health and wellbeing difficulties: By creating a safe and calm environment, where mental health problems are less likely to occur, the leadership can improve the mental health and wellbeing of the school community and instil resilience in pupils. A preventative approach includes teaching pupils about mental wellbeing through the curriculum and reinforcing these messages in our activities and ethos.

- Identifying mental health and wellbeing difficulties: By equipping staff with the knowledge required, early and accurate identification of emerging problems is enabled.
- Providing early support for pupils experiencing mental health and wellbeing difficulties: By raising awareness and employing efficient referral processes, the school's leadership can help pupils access evidence-based early support and interventions.
- Accessing specialist support to assist pupils with mental health and wellbeing difficulties: By working effectively with external agencies, the school can provide swift access or referrals to specialist support and treatment.
- Identifying and supporting pupils with SEND: As part of this duty, the school's leadership considers how to use some of the SEND resources to provide support for pupils with mental health difficulties that amount to SEND.
- Identifying where wellbeing concerns represent safeguarding concerns: Where mental health and wellbeing concerns could be an indicator of abuse, neglect or exploitation, the school will ensure that appropriate safeguarding referrals are made in line with the Child Protection and Safeguarding Policy.

The governing board is responsible for:

- Fully engaging pupils with SEMH needs and their parents when drawing up policies that affect them.
- Identifying, assessing and organising provision for all pupils with SEMH needs, whether or not they have an EHC plan.
- Endeavouring to secure the special educational provision called for by a pupil's SEMH needs.
- Designating an appropriate member of staff to be the SENCO and coordinating provisions for pupils with SEMH needs
- Taking all necessary steps to ensure that pupils with SEMH needs are not discriminated against, harassed or victimised.
- Ensuring arrangements are in place to support pupils with SEMH difficulties.

- Appointing an individual governor or sub-committee to oversee the school's arrangements for SEMH.

The headteacher is responsible for:

- Ensuring that those teaching or working with pupils with SEMH difficulties are aware of their needs and have arrangements in place to meet them.
- Ensuring that teachers monitor and review pupils' academic and emotional progress during the course of the academic year.
- Ensuring that the SENCO has sufficient time and resources to carry out their functions, in a similar way to other important strategic roles within the school.
- On an annual basis, carefully reviewing the quality of teaching for pupils at risk of underachievement, as a core part of the school's performance management arrangements.
- Ensuring that staff members understand the strategies to identify and support pupils with SEMH needs
  - Ensuring that procedures and policies for the day-to-day running of the school do not directly or indirectly discriminate against pupils with SEMH needs
  - Establishing and maintaining a culture of high expectations and including pupils with SEMH needs in all opportunities that are available to other pupils.
  - Consulting health and social care professionals, pupils and parents to ensure the needs of pupils with SEMH needs are effectively supported.
  - Keeping parents and relevant staff up-to-date with any changes or concerns involving pupils with SEMH needs.
  - Ensuring staff members have a good understanding of the mental health support services that are available in their local area, both through the NHS and voluntary sector organisations.

The mental health lead is Françoise Fokias, Acting Deputy Head and Inclusion Lead, is responsible for:

- Collaborating with other members of the Inclusion Team, the Headteacher, the SLT and governing board to outline and strategically develop SEMH policies and provisions for the school.
- Coordinating with the Inclusion Coordinator (Jayne Taylor) the Learning Mentor (Claire Byrne) and School Counsellors to provide a high standard of care to pupils who have SEMH needs.
- Advising on the deployment of the school's budget and other resources in order to effectively meet the needs of pupils with SEMH needs.
- Being a key point of contact with external agencies, especially the mental health support services, the LA, LA support services and mental health support teams.
- Providing professional guidance to colleagues about mental health and working closely with staff members, parents and other agencies, including SEMH charities.
- Referring pupils with SEMH needs to external services, e.g. specialist Child and Adult Mental Health Service (CAMHS), to receive additional support where required.
- Overseeing the outcomes of interventions on pupils' education and wellbeing.
- Liaising with parents of pupils with SEMH needs.
- Liaising with other schools, educational psychologists, health and social care professionals, and independent or voluntary bodies.
- Liaising with the potential future providers of education, such as secondary school teachers, to ensure that pupils and their parents are informed about options and a smooth transition is planned.
- Leading mental health CPD.

She is also responsible as SENCO for:

- Collaborating with the governing board, headteacher and the mental health lead, as part of the SLT, to determine the strategic development of SEMH policies and provisions in the school.
- Undertaking day-to-day responsibilities for the successful operation of the SEMH Policy.
- Supporting teachers in the further assessment of a pupil's particular strengths and areas for improvement, and advising on the effective implementation of support.

The teaching staff are responsible for:

- Being aware of the signs of SEMH difficulties.
- Planning and reviewing support for their pupils with SEMH needs in collaboration with parents, the SENCO and, where appropriate, the pupils themselves.
- Setting high expectations for every pupil and aiming to teach them the full curriculum, whatever their prior attainment.
  - Planning lessons to address potential areas of difficulty to ensure that there are no barriers to every pupil achieving their full potential, and that every pupil with SEMH needs will be able to study the full national curriculum.
- Being responsible and accountable for the progress and development of the pupils in their class.
- Being aware of the needs, outcomes sought and support provided to any pupils with SEMH needs.
- Keeping the relevant figures of authority up-to-date with any changes in behaviour, academic developments and causes of concern.

The school works in collaboration with mental health support workers who are trained professionals who act as a bridge between schools and mental health agencies.

## Creating a supportive whole-school culture

Senior leaders will clearly communicate their vision for good mental health and wellbeing with the whole school community.

The school utilises various strategies to support pupils who are experiencing high levels of psychological stress, or who are at risk of developing SEMH problems, including:

- Teaching about mental health and wellbeing through curriculum subjects such as:
  - PSHE
  - Relationships and sex education (RSE)
  - Science: being healthy includes good mental health.
- Counselling
- Positive classroom management (linked to the Behaviour Policy)
- Developing pupils' social skills
- Working with parents
- Peer support

The school's Anti-Bullying Policy includes measures to prevent and tackle bullying and contains an individualised, graduated response when behaviour may be the result of mental health needs or other vulnerabilities.

The Junior Leadership Team (JLT) also monitor with their classes whether their peers are satisfied with the school's approach against bullying and report to SLT on a regular basis any arising issues.

The SLT ensures that there are clear policies and processes in place to reduce stigma and make pupils feel comfortable enough to discuss mental health concerns.

Pupils know where to go for further information and support should they wish to talk about their mental health needs or concerns over a peer's or family member's mental health or wellbeing.

### Staff training

The SLT ensures that all teachers have a clear understanding of the needs of all pupils, including those with SEMH needs.

The SLT promotes CPD to ensure that staff are able to recognise common symptoms of mental health problems, what represents a concern, and what to do if they believe they have spotted a developing problem.

Clear processes are in place to help staff, who identify SEMH problems in pupils, escalate issues through clear referral and accountability systems.

### Identifying signs of SEMH difficulties

Mulgrave is committed to striving for early identification with regards to pupils with SEMH difficulties.

Staff are trained to know how to identify possible mental health problems and understand what to do if they spot signs of emerging difficulties. Jayne Taylor is trained in ELSA (Emotional Literacy) and is able to support individual pupils using this programme.

When the school suspects that a pupil is experiencing mental health difficulties, the following graduated response is employed:

- An assessment is undertaken to establish a clear analysis of the pupil's needs
- A plan is set out to determine how the pupil will be supported
- Action is taken to provide that support
- Regular reviews are undertaken to assess the effectiveness of the provision, and changes are made as necessary

A Boxall Profile is utilised when a pupil is suspected of having SEMH difficulties. A Boxall Profile can assist staff members in creating an overview of the pupil's mental health and making a judgement about whether the pupil is likely to be suffering from any SEMH difficulties. Claire Byrne, Learning Mentor, and the SENDCo are trained in assessing needs using the Boxall profile

Staff members understand that persistent mental health difficulties can lead to a pupil developing SEND. If this occurs, the headteacher ensures that correct provisions are implemented to provide the best learning conditions for the pupil, such as providing school counselling. Both the pupil and their parents are involved in any decision-making concerning what support the pupil needs.

Staff members discuss concerns regarding SEMH difficulties with the parents of pupils who have SEMH needs.

Staff members consider all previous assessments and progress over time, and then refer the pupil to the appropriate services.

Staff members take any concerns expressed by parents, other pupils, colleagues and the pupil in question seriously.

The assessment, intervention and support processes available from the LA are in line with SEND Support.

All assessments are in line with the provisions outlined in the school's SEND Policy. For example extra time or brain breaks. See also Positive Behaviour Support Plans.

Staff members are aware of factors that put pupils at risk of SEMH needs, such as low self-esteem, physical illnesses, academic difficulties and family problems.

Staff members are aware that risks are cumulative and that exposure to multiple risk factors can increase the risk of SEMH needs.

Staff members promote resilience to help encourage positive SEMH.



