

NANTWICH PRIMARY ACADEMY & NURSERY

PRINCIPAL – Sue Spence

Mental Health and Wellbeing Policy



Approved by Governors

Updated: December 2025

Review Date: December 2026

Nantwich Primary Academy & Nursery
Manor Road, Nantwich, Cheshire, CW5 5LX
Tel – 01270 902055 nantwichoffice@sbmat.org

Policy Intent:

At Nantwich Primary Academy we are committed to supporting the positive mental health and wellbeing of our whole community of children, staff, parents and carers.

Our ethos is supportive, caring and respectful. We understand how important positive mental health and wellbeing is to our lives. We recognise that children's mental health is a vital factor in their overall wellbeing and how it can affect their learning and achievements. Our academy encourages children to be open and we support all children to have their voice heard.

Definition of Mental Health and Wellbeing

"A state of wellbeing in which every individual realises his or her own potential, can cope with the natural stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community."

The Department for Education (DfE) recognises that "in order to help their children succeed, schools have a role to play in supporting them to be resilient and mentally healthy". Our School is a place for children to experience a nurturing and supportive environment. We support the children to develop their self-esteem and build resilience. We understand all children and their families go through ups and downs, and some face significant life events.

A survey published in February 2022 by Place2Be and the National Association of Head Teachers finds that mental health problems among pupils had increased since the start of the academic year, including low self esteem (86%), depression (76%) and constant feelings of anger (68%).

Recent research shows that among those aged 6 to 16 in England, one in six had a probable mental health condition in 2021, up from one in nine in 2017. Current figures are especially concerning for adolescent girls aged between 17 and 19: one in four had a probable mental health condition in 2021.

Our culture of nurturing children and building resilience to mental health problems means our School is a safe place where:

- Every child feels valued;
- Every child has a sense of belonging;
- Every child feels able to talk openly with trusted members of staff about their problems;
- Positive mental health is promoted;
- Bullying is not tolerated.

We recognise the importance of supporting positive mental health and wellbeing to the whole School community.

At Nantwich Primary Academy positive mental health is everybody's responsibility.

Young Minds

We recognise that mental health and wellbeing is not simply the absence of mental health problems. We know building children's confidence and self-esteem in a safe environment is vital to positive mental health and successful learning outcomes.

At our School we want all children to:

- Understand their emotions and experiences;
- Form and maintain friendships and relationships;
- Be able to express a range of emotions appropriately;
- Develop resilience and cope with setbacks;
- Manage the stresses of everyday life and be able to deal with change;
- Learn and achieve.

Aim:

This policy is a guide for all teaching and non-teaching staff. It outlines our approach and commitment to promoting and supporting positive mental health and wellbeing in the whole School community. It should be read and understood alongside KCSIE (2022), our Child Protection and Safeguarding policies.

Purpose of the Policy:

This Policy sets out:

How we promote and support positive mental health in the whole School community;

How we identify and support children with mental health needs;

How we prevent mental health problems;

How we support whole families in dealing with children's mental health problems;

How we support staff in spotting early warning signs in children and addressing mental health problems.

Mentally Healthy Environment:

We maintain a mentally healthy environment for pupils and staff by:

- Promoting our School rules and values, and encouraging a sense of belonging and community;
- Providing opportunities to develop self-worth;
- Valuing each pupil for who they are;
- Celebrating academic and non-academic achievements;
- Supporting our children to have their say and participate in decision-making;

- Raising awareness amongst staff about early warning signs and symptoms of mental health issues;
- Supporting staff who are struggling with their own mental health problems.

Staff Roles and Responsibilities

All teaching and non-teaching staff have a responsibility and important role in promoting and supporting the mental health and well being of children and each other. We understand some children will need additional help and we know all staff have a responsibility to look out for early warning signs to ensure children get the early intervention and support they need.

We recognise that many behaviours and emotional problems can be supported within the School environment, or with guidance from external professionals. We can make referrals to mental health professionals and organisations that provide support with mental health needs to children and their families.

If a member of staff is concerned about the mental health and wellbeing of a pupil or other staff member, in the first instance they should speak to our Designated Mental Health Lead – Mrs J McGhie.

All staff should also 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.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Staff however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one.

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that staff are aware of how these children's experiences can impact on their mental health, behaviour and education.

If staff have a mental health concern about a child that is also a safeguarding concern, immediate action should be taken, following their child protection policy and speaking to the a designated safeguarding lead.

If a child or staff member presents a medical emergency then relevant procedures must be followed, including involving the emergency services.

Promoting and Supporting Children's Positive Mental Health

Our academy promotes positive mental health and we aim to prevent mental health problems through our developed range of activities and strategies including:

Class activities – certificates and dojo points/awards; circle time; worry box, reflection areas.

Transition programme – activities e.g. Primary College, to support Year 6 children moving onto senior school.

Whole School initiatives –

- My Happy Mind programme
- Responsibility roles.
- Compass for life
- Mental Health First Aider- Mrs Lyall- Brookes.
- Drawing talking therapy
- Nurture sessions
- Well being assemblies

Through our whole-School PSHE programme, we teach social and emotional skills to develop the children's confidence and resilience. In KS1, we explore simple strategies for managing feelings and who to go to if they are feeling worried or upset. In KS2, we help the children to develop positive coping strategies and build their understanding of how to motivate themselves, be supportive of others, and the importance of talking to someone and how to get help.

Identifying and Supporting children with Mental Health Needs:

Our approach is to encourage and support children to express themselves and be listened to in a safe environment.

All staff have a responsibility to facilitate and support positive mental health. We aim to spot the early warning signs of mental health issues and to identify appropriate support for the children based on their needs. We involve parents and carers wherever possible and also the children themselves in the care and support they need in school.

We take a whole-community approach towards the mental health of our pupils. Our aim is to support the whole family if possible, through Early help, but we recognise that we are teachers not mental health professionals. This means regular communication with parents explaining our concerns if appropriate and giving parents guidance about who they can talk to about their children's mental health problems. We involve parents and carers, advise parents to engage the services of mental health professionals if required, and work with professional partners and agencies where necessary.

Disclosures by Children of Mental Health Concerns

Our academy recognises the importance of staff remaining calm, supportive and nonjudgemental with children who disclose a concern. Staff should make it clear to the children that the concern will be shared with the Mental Health Lead to help them and get the support they need. Staff understand they need to listen, not advise.

Interventions and Support

All concerns are reported to the Mental Health Lead and recorded on CPOMS. The Mental Health Lead assesses the level of need to ensure the child gets the appropriate support from within School or from an external health professional. We aim to put early interventions in place wherever possible and to prevent problems escalating.

The Mental Health and Wellbeing Policy is monitored and reviewed by the Mental Health Lead.

Short term stress and worry is a normal part of life and many issues can be experienced as mild or transitory challenges for some children and their families. Others will experience more serious and longer lasting effects. The same experience can have different effects on different children depending on other factors in their life. For example, it is normal for children to feel nervous or under stress around exam times, but other factors can make such stress part of an enduring and persistent mental health problem for some children. When a problem is particularly severe or persistent over time, or when a number of these difficulties are experienced at the same time, children are often described as experiencing mental health problems

Mental health professionals have classified these as:

- emotional disorders, for example phobias, anxiety states and depression;
- conduct disorders, for example stealing, defiance, fire-setting, aggression and antisocial behaviour;
- hyperkinetic disorders, for example disturbance of activity and attention;
- developmental disorders, for example delay in acquiring certain skills such as speech, social ability or bladder control, primarily affecting children with autism and those with pervasive developmental disorders; • attachment disorders, for example children who are markedly distressed or socially impaired as a result of an extremely abnormal pattern of attachment to parents or major care givers;
- Trauma disorders, such as post-traumatic stress disorder, as a result of traumatic experiences or persistent periods of abuse and neglect; and
- other mental health problems including eating disorders, habit disorders, somatic disorders; and psychotic disorders such as schizophrenia and manic depressive disorder.

Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Non-professional diagnoses, however well meant, can exacerbate or promote mental health problems. Schools, however, are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing a mental health problem or be at risk of developing one.

Table 1: Risk and protective factors that are believed to be associated with mental health outcomes

	Risk Factors	Protective Factors
--	--------------	--------------------

In the child	<ul style="list-style-type: none"> • Genetic influences • Low IQ and learning disabilities • Specific development delay or neuro-diversity • Communication difficulties • Difficult temperament • Physical illness • Academic failure • Low self-esteem 	<ul style="list-style-type: none"> • Secure attachment experience • Outgoing temperament as an infant • Good communication skills, sociability • Being a planner and having a belief in control • Humour • A positive attitude • Experiences of success and achievement • Faith or spirituality • Capacity to reflect
In the family	<ul style="list-style-type: none"> • Overt parental conflict including domestic violence • Family breakdown (including where children are taken into care or adopted) • Inconsistent or unclear discipline • Hostile and rejecting relationships • Failure to adapt to a child's changing needs • Physical, sexual, emotional abuse, or neglect • Parental psychiatric illness • Parental criminality, alcoholism or personality disorder • Death and loss – including loss of friendship 	<ul style="list-style-type: none"> • At least one good parent-child relationship (or one supportive adult) • Affection • Clear, consistent discipline • Support for education • Supportive long term relationship or the absence of severe discord

<p>In the school</p>	<ul style="list-style-type: none"> • Bullying including online (cyber) • Discrimination • Breakdown in or lack of positive friendships • Deviant peer influences • Peer pressure • Peer on peer abuse • Poor pupil to teacher/school staff relationships 	<ul style="list-style-type: none"> • Clear policies on behaviour and bullying • Staff behaviour policy (also known as code of conduct) • 'Open door' policy for children to raise problems • A whole-school approach to promoting good mental health • Good pupil to teacher/school staff relationships • Positive classroom management • A sense of belonging • Positive peer influences • Positive friendships • Effective safeguarding and Child Protection policies. • An effective early help process • Understand their role in and be part of effective multiagency working • Appropriate procedures to ensure staff are confident to can raise concerns about policies and processes, and know they will be dealt with fairly and effectively
----------------------	---	--

<p>In the community</p>	<ul style="list-style-type: none"> • Socio-economic disadvantage • Homelessness • Disaster, accidents, war or other overwhelming events • Discrimination • Exploitation, including by criminal gangs and organised crime groups, trafficking, online abuse, sexual exploitation and the influences of extremism leading to radicalisation • Other significant life events 	<ul style="list-style-type: none"> • Wider supportive network • Good housing • High standard of living • High morale school with positive policies for behaviour, attitudes and anti-bullying • Opportunities for valued social roles • Range of sport/leisure activities
-------------------------	---	---