

Mental Health and Wellbeing Policy and Strategy 2026 - 2027

1 Purpose

Bay Learning Academy CIC promotes positive mental health and emotional wellbeing through a safe, inclusive and relational approach. This policy explains how Bay promotes wellbeing, identifies concerns early, provides proportionate educational and pastoral support, listens to learners, works with families and commissioners, and obtains specialist help when required.

Bay is an education provider, not a clinical mental health service. Staff do not diagnose mental illness or provide therapy unless appropriately qualified and authorised. Bay support complements, but does not replace, assessment or treatment by health professionals.

2 Scope

This policy applies to all learners, including KS4, post-16, short-term, onsite, online and blended provision, and to employees, volunteers and relevant contracted staff. Arrangements are adapted to age, capacity, SEND, communication needs, placement length and individual circumstances. For learners aged 18 or over, consent and family involvement are considered in accordance with applicable law and safeguarding duties.

3 Framework and Related Policies

This policy reflects the Department for Education whole-school and college approach to mental health and wellbeing: leadership, ethos, staff development, curriculum, student voice, identification and impact monitoring, targeted support and referral, and work with parents and carers. It should be read with Bay policies covering safeguarding, SEND, attendance, relational practice, PSHE and RSHE, admissions, induction, equality, data protection and staff wellbeing.

4 Principles

- Mental health and wellbeing are everyone's responsibility.
- Behaviour, attendance and engagement may communicate an unmet need and are considered alongside safeguarding, SEND, contextual and educational information.
- Learners are treated as individuals and are not defined by a diagnosis.
- Support is relational, trauma-informed, inclusive, proportionate and focused on access to education.
- Learners' views, feelings and wishes inform decisions and reviews.
- Bay works within its competence and seeks specialist advice or referral when needed.
- Confidentiality is respected, but information is shared where necessary to protect a learner or another person.

5 Leadership and Responsibilities

Role	Responsibilities
Principal and Senior Leadership Team	Provide strategic oversight, resources and accountability; ensure links with safeguarding, SEND, attendance and curriculum; review themes and impact.
Principal and Student Welfare Lead	Lead and review the whole-setting approach; coordinate the annual strategy; oversee training, pathways, partnerships and impact monitoring.



Role	Responsibilities
Student Welfare Lead	Coordinate induction welfare conversations, student voice, planned check-ins, wellbeing-room access, proportionate records, family liaison and referrals.
Designated Safeguarding Lead	Lead responses to safeguarding concerns, including self-harm, suicidal ideation, abuse, neglect, exploitation or immediate risk.
All staff	Build safe relationships, notice changes, listen without investigating, record and report concerns promptly, maintain boundaries and follow agreed plans.
Commissioners	Provide accurate referral information, contribute to planning and review, and support access to external assessment or services where required.

Role allocation does not remove the safeguarding responsibilities of the DSL or the accountability of the Principal.

6 Whole Setting Approach

6.1 Ethos and Environment

Bay provides predictable routines, respectful relationships, reasonable adjustments, trusted adults and a wellbeing room. The wellbeing room is a supportive, supervised space and is not used as a sanction, exclusion room or routine alternative to education.

6.2 Student Voice

Every learner is offered a one-to-one induction conversation with the Student Welfare Lead. Learners have further planned and informal opportunities to share their views, feelings and wishes through check-ins, learning and placement reviews, trusted adults, feedback activity and transition planning. Where appropriate, staff explain what action has been taken because of the learner's feedback.

6.3 Curriculum and Prevention

Through PSHE, tutorials, relational practice and wider curriculum activity, learners receive age-appropriate education about emotions, mental health, resilience, healthy relationships, coping strategies, sleep, physical activity, online influences, stress, transitions, help-seeking and stigma. Teaching is inclusive and does not invite personal disclosure in a group setting.

6.4 Staff Development and Wellbeing

Staff receive appropriate induction and development on recognising concerns, safeguarding, recording, relational and trauma-informed practice, role boundaries and referral routes. Bay promotes reasonable workload, access to support and opportunities to debrief or receive supervision following difficult incidents. Staff are not expected to act as therapists.

7 Identifying Need

Staff remain alert to significant or sustained changes in presentation, behaviour, mood, relationships, attendance, engagement, attainment, self-care or physical complaints, and to concerns raised by the learner, family, commissioner or professional. Indicators are considered in context and are not treated as a diagnosis.

Concerns are recorded factually and shared with the Student Welfare Lead, DSL or other appropriate lead according to urgency and nature. The learner's views are sought safely and accessibly. Staff do not promise secrecy or investigate safeguarding concerns themselves.

8 Graduated Support

Level	Examples of Bay response
Universal	Relational practice, PSHE, trusted adults, induction, student voice, predictable routines, reasonable adjustments and wellbeing information.
Additional	Planned check-ins, supervised wellbeing-room access, an individual support plan, family and commissioner liaison, targeted educational adjustments and review.
Targeted or specialist	DSL action, Early Help, GP, school nursing, educational psychology, Mental Health Support Team, NHS children and young people's mental health services, emergency services or other suitable provision.

9 Safeguarding and Urgent Concerns

Self-harm, suicidal thoughts or plans, abuse, neglect, exploitation, risk to another person or a significant deterioration in functioning may constitute safeguarding concerns. Staff must follow Bay's Safeguarding and Child Protection Policy and report concerns to the DSL immediately. A learner must not be left alone where there is an immediate safety risk. Emergency services are contacted where there is an immediate medical or life-threatening risk.

Parents or carers are normally informed when a child needs mental health support, unless doing so could increase risk or conflict with safeguarding advice. The DSL decides information-sharing in safeguarding cases. The commissioner is involved where the concern affects placement, attendance, access to education or commissioned support.

10 Attendance Behaviour and SEND

Where mental health affects attendance, behaviour or access to learning, Bay seeks to understand barriers, considers reasonable adjustments, works with the learner, family and commissioner, and maintains appropriately ambitious educational expectations. Mental health needs may coexist with SEND and are considered through Bay's graduated approach; a diagnosis is not required before reasonable support can begin.

11 Recording and Confidentiality

Records are factual, proportionate, timely and securely stored. They include the concern, learner voice, relevant observations, risks, actions, responsible staff, referrals and review arrangements. Safeguarding information is recorded within Bay's safeguarding system. Information is shared on a need-to-know basis in accordance with data protection and safeguarding requirements.

12 Monitoring Impact

Bay evaluates its approach using proportionate evidence, including learner voice, feelings of safety and belonging, access to help, attendance, engagement, progress, agreed outcomes, repeated incidents, referrals, transitions, family and commissioner feedback, and staff confidence. Individual support is reviewed according to need and whole-setting themes are reviewed at least termly.

13 Strategy Priorities 2026 - 2027

- Embed the induction, student voice, wellbeing check-in and recording process.
- Implement and review wellbeing-room access, supervision and reintegration arrangements.



- Maintain an up-to-date local support and referral pathway.
- Complete a termly review of learner voice, attendance, engagement, referrals and the impact of wellbeing support.

14 Complaints

Concerns about implementation should normally be raised with Bay and managed under the Complaints Policy. Safeguarding concerns must be reported immediately through safeguarding procedures and should not wait for the complaints process.

15 Monitoring and Review

The Senior Mental Health Lead coordinates implementation and reports to the Senior Leadership Team. This policy is reviewed annually, or sooner following significant guidance, organisational or safeguarding changes.

16 Reference Framework

- Department for Education, Promoting and supporting mental health and wellbeing in schools and colleges, updated 28 April 2026.
- Department for Education, Mental health and behaviour in schools.
- Keeping Children Safe in Education 2026.
- SEND Code of Practice 0 to 25 years.
- Working together to improve school attendance and associated guidance on mental health-related absence.
- Relationships, Sex and Health Education statutory guidance applicable from September 2026.