

Thornden School Mental Health & Wellbeing Framework

1. Intent

At Thornden, mental health and wellbeing are not initiatives — they are the culture. Our approach is rooted in our shared values of Belong · Care · Aspire · Succeed, and our commitment to ensuring that every student is known, valued, and supported to flourish both personally and academically.

We recognise that emotional wellbeing is a precondition for learning, and that students thrive when they feel safe, connected, and successful.

Our intent is therefore to build a school environment and curriculum where every interaction, lesson, and policy actively promotes belonging, resilience, and hope.

Our Strategic Intent

Thornden aims to:

- Embed a preventative wellbeing culture across the curriculum, ensuring that all students develop emotional literacy, self-regulation, and coping strategies before crises emerge.
- Normalise mental health education so that understanding, discussing, and seeking support for wellbeing is part of everyday school life.
- Develop self-efficacy and resilience, enabling students to recognise their own strengths, manage setbacks, and sustain motivation in the face of challenge.
- Promote early help and inclusion, ensuring that barriers to attendance, engagement, and participation are identified and addressed quickly through coordinated multi-agency support.
- Empower staff as front-line wellbeing educators, confident to recognise early warning signs, respond with compassion, and make timely, effective referrals.
- Equip families with tools and communication channels to support wellbeing at home, creating continuity between school, family, and community.

Our Vision in Practice

Wellbeing at Thornden is experienced through:

- A curriculum that teaches emotional intelligence alongside academic knowledge, helping students to understand themselves and others.
- A safe and inclusive environment where diversity is celebrated and all students — regardless of background or need — can thrive.

- A relational culture, built on consistency, kindness, and restorative practice, where students learn from mistakes and rebuild trust.
- An ambitious enrichment programme that promotes joy, creativity, leadership, and service.
- Visible, accessible support systems (Wellbeing Den, ELSA, Thornden Hub, MHST, counselling, and pastoral networks) that ensure no student is “unseen.”
- Strong data-informed leadership, where wellbeing trends from CPOMS, attendance, and student voice are analysed termly to shape provision and evidence impact.

Outcomes We Strive For

- Students who are emotionally literate, able to identify, express and manage feelings constructively.
- Students who attend, engage and succeed, demonstrating resilience and pride in being part of the Thornden community.
- Students who feel safe and heard, with clear understanding of how to report concerns and access support.
- A staff culture that is nurturing, consistent, and confident in promoting positive mental health.
- A school that is recognised for turning wellbeing from policy into lived practice — measurable through data, voice, and outcomes.

“Our ambition is that every student at Thornden leaves not only with strong academic outcomes, but also with the emotional resilience, empathy and self-belief to succeed in life and contribute positively to society.”

Whole-School Mental Health Overview

Thornden’s mental health framework operates as a tiered system of prevention, early help, and targeted recovery, ensuring that every student is supported in the right way, at the right time.

This model is woven through curriculum, culture, leadership and data, and is delivered by all staff — not just specialists.

It is underpinned by the principle that emotional wellbeing is everyone’s responsibility and that a culture of belonging is the strongest form of prevention.

Tier 0 – Universal Provision: Prevention and Culture

	Core Features	Mental Health Integration	Impact and Evidence
Curriculum and PD	Spiral RSHE and PD curriculum teaching emotional literacy, self-regulation, and resilience.	Every student learns the language of emotion, coping, and help-seeking.	85% of students report improved ability to manage stress; CPOMS wellbeing logs down 19%.
Tutor Programme and Reflection	Weekly reflections, gratitude journals, and safe-space discussions.	Builds self-awareness and positive self-talk; normalises dialogue about mental health.	91% of students can name a trusted adult; increase from 68% baseline.
Assemblies and Awareness	Termly themes: <i>Belong, Care, Aspire, Succeed.</i>	Reinforces community, inclusion and kindness as daily habits.	93% of students feel staff care about their wellbeing (Student Voice 2025).
Classroom Climate and Teaching	<i>Reach for the Stars</i> and <i>Thornden DNA</i> frameworks ensure calm, structured classrooms.	Predictability and empathy reduce anxiety and promote belonging.	Behaviour removals ↓ 13%; SEND anxiety referrals ↓ 17%.
Enrichment and Leadership	Clubs, music, volunteering, student voice, Thornden Champions.	Strengthens social identity, confidence and belonging.	Over 2,200 students participated in enrichment in 2024–25.

	Core Features	Mental Health Integration	Impact and Evidence
Staff Culture	Trauma-informed practice, relational consistency and restorative conversations.	Models emotional literacy and co-regulation.	94% of staff confident supporting emotional need (Staff Voice).

Summary: Universal provision ensures that *wellbeing is experienced daily* — through routine, kindness, and consistency — providing psychological safety for every student.

Tiers 1-2 – Targeted Provision: Early Help and Regulation

	Core Features	Mental Health Integration	Impact and Evidence
Thornden Hub	Weekly multi-agency meeting (SENCOs, HOYs, SPSM, ELSA, Nurse, DSL).	Rapid response for students showing early emotional distress or attendance decline.	47 students supported; 93% improved attendance within 12 weeks.
Wellbeing Den (WBD)	Daily drop-in and structured morning routine for anxious students.	Prevents escalation of EBSA; fosters calm starts and re-engagement.	28 students daily average; 92.8% attendance vs 83.4% pre-intervention.
ELSA and MHST	Emotional literacy and cognitive-behavioural therapy support.	Builds coping mechanisms, self-regulation and problem-solving.	82% of supported students show improved emotional regulation.
Mentoring and Tutor Support	Weekly 1:1 or small-group check-ins with trusted adults.	Provides relational stability and consistent emotional containment.	89% of mentored students report increased confidence and belonging.

	Core Features	Mental Health Integration	Impact and Evidence
Restorative Behaviour Day (RBD)	Reflective reintegration post-incident; focuses on empathy and accountability.	Converts behaviour reflection into emotional learning.	Peer conflict logs down 21%; improved relational repair.
Parent Partnership	Family wellbeing meetings and PASP co-production.	Promotes consistency between home and school.	95% parent satisfaction in pastoral support survey (2025).

Summary: Targeted provision ensures that *no student falls through the net* — bridging the gap between universal support and clinical intervention through compassion and structure.

Tier 3 – Specialist and Multi-Agency Provision

Partner / Service	Function	Mental Health Integration	Impact and Evidence
CAMHS and MHST	Therapeutic support for anxiety, trauma and mood disorders.	Provides evidence-based CBT and parent work for sustained recovery.	78% of MHST cases resolved without escalation; improved attendance post-therapy.
School Nursing Team	Physical and emotional health support, including sleep, diet and medication.	Addresses physical factors influencing mental wellbeing.	112 students supported; 71% improved self-care routines.
Solent Mind and Simon Says	Specialist wellbeing and bereavement education.	Builds resilience through guided emotional processing.	100% KS3 participation; strong feedback from parents.

Partner / Service	Function	Mental Health Integration	Impact and Evidence
Early Help and Social Care	Multi-agency family intervention.	Tackles underlying causes such as conflict, poverty, or neglect.	19 active cases; improved attendance and parental engagement.
Reduced Hours and Alternative Provision (RHP/AP)	Bespoke reintegration with therapeutic focus.	Provides structure, safety and phased return for high-anxiety or EBSA students.	87% successful reintegration rate; sustained attendance post-return.

Summary: Specialist intervention ensures *continuity of care* between education and health — supporting students to recover, rebuild and reintegrate with dignity.

A. Personal Development & Curriculum Design – Mental Health

Year Group / Theme	Key Learning Focus	Example Lesson Content & Impact	Mental Health Integration
Year 7 – Belonging and Transition	Emotions, friendships, identity.	<i>My Wellbeing Toolkit, Transition and Change, Sleep & Screen Time.</i>	Normalises emotions, reduces transition anxiety, and builds resilience through gratitude and self-awareness.
Year 8 – Resilience and Self-Image	Stress, self-esteem, digital pressure.	<i>The Science of Stress, Social Media & Self-Image.</i>	Supports self-acceptance, body confidence, and stress

			management through cognitive-behavioural tools.
Year 9 – Mental Health Literacy	Anxiety, loss, self-harm awareness.	<i>Coping with Anxiety, Grief and Loss.</i>	Builds literacy and coping skills; reinforces early help-seeking and empathy.
Year 10 – Managing Pressure	Exams, workload, wellbeing.	<i>Stress & Sleep, Work–Life Balance.</i>	Promotes practical stress-management strategies and healthy lifestyle choices.
Year 11 – Flourishing and Transition	Resilience and gratitude.	<i>Preparing for Change, Gratitude and Growth.</i>	Fosters optimism and emotional closure; supports transition anxiety.

C. Cross-Curricular Integration – Mental Health Focus

Subject	Approach	Mental Health Integration
English	Exploration of grief, injustice, empathy.	Encourages emotional expression and compassion.
PE	Teamwork, fitness, resilience.	Strengthens body–mind connection and self-esteem.
Science	Biology of stress and sleep.	Builds understanding of mental-physical health links.
RS / Ethics	Compassion, justice, forgiveness.	Promotes reflection, morality, and empathy.
Computing	Digital wellbeing and safety.	Encourages balanced online habits and reduces screen-based anxiety.

B. Assemblies & Awareness Culture – Mental Health

Term Theme	Focus Area	Example Assemblies and Campaigns	Mental Health Integration
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Autumn 1 – Belong	Transition & Inclusion	<i>Welcome to Thornden, Kindness Week, Digital Detox.</i>	Supports emotional adjustment, safe relationships, and digital self-care.
Autumn 2 – Resilience & Remembrance	Community & Empathy	<i>Remembrance Live, Courage & Hope, Kooth Introduction.</i>	Builds gratitude and reflective coping; signposts mental-health support.
Spring 1 – Care	Emotional Regulation & Relationships	<i>Solent Mind Week, Children’s Mental Health Week.</i>	Raises emotional awareness; models positive coping strategies.
Spring 2 – Respect & Responsibility	Inclusion & Safety	<i>Safer Internet Day, Young Carers Awareness.</i>	Reinforces safe behaviours and empathy for vulnerable peers.
Summer 1 – Aspire	Motivation & Growth Mindset	<i>Exam Resilience, Women in Leadership.</i>	Teaches perseverance and adaptive thinking to manage stress.
Summer 2 – Succeed	Gratitude & Celebration	<i>Pride Month, Celebration Assemblies.</i>	Builds optimism, belonging, and pride — core protective wellbeing factors.

D. External Partner Integration – Mental Health Impact

Partner	Contribution	Mental Health Integration
Kooth	Online mental-health support.	Empowers self-help and reduces stigma.
Solent Mind	Stress and resilience workshops.	Improves coping and self-awareness.
MHST (Hampshire)	Group CBT for anxiety.	Provides early therapeutic intervention.

Simon Says	Bereavement education.	Supports grief management and peer empathy.
Young Carers	Awareness and support.	Reduces hidden emotional load and isolation.

E. Adaptive Teaching & Classroom Climate – Reach for the Stars

Principle	Classroom Practice	Wellbeing & Inclusion Impact	Mental Health Integration
Raising Aspirations – “We can, and we will.”	Teachers explicitly communicate belief in every student’s ability to succeed.	Builds self-efficacy, motivation, and resilience.	Promotes positive self-concept and reduces hopelessness or low mood.
Quality over Quantity – “If you let them off, you let them down.”	Focus on depth of understanding, not task volume.	Reduces overwhelm while maintaining purpose.	Prevents stress-related disengagement and promotes confidence.
Know Your Students	Use Student Profiles, SEN plans, and Pastoral Sheets to personalise scaffolds.	Strengthens trust and regulation; supports EBSA and SEND learners.	Personalised understanding supports emotional safety and self-regulation.
Structured Lessons	Consistent sequence: <i>Recall</i> → <i>Model</i> → <i>Scaffold</i> → <i>Practise</i> → <i>Review</i> → <i>Reflect</i> .	Predictability reduces anxiety.	Familiar structure supports executive function and reduces worry.
Show Them How – Scaffold & Model Success	Teachers model thinking aloud, use worked examples and dual coding.	Provides clarity and cognitive safety.	Enhances confidence and combats perfectionism and self-doubt.
Create the Weather – Aim High	Teachers model calm authority and emotional control.	Classroom tone acts as co-regulation.	Staff model self-regulation and emotional balance for students.

F. The Thornden DNA – Mental Health Integration

Pillar	What It Looks Like in Practice	Evidence of Impact (2024–25)	Mental Health Integration
1. Consistency	Every lesson begins with a calm <i>Do Now</i> ; routines and expectations are identical across subjects.	94% of students report lessons start promptly and feel structured (Student Voice 2025).	Predictability lowers anxiety and supports emotional regulation through routine.
2. Belonging	Teachers greet students at the door and recognise effort as much as outcome. Displays celebrate diversity and student voice.	CPOMS “positive recognition” notes up 31%; attendance +0.6% after belonging campaigns.	Belonging builds identity and self-worth, reducing isolation and withdrawal.
3. Clarity and Structure	Learning objectives, modelling, and success criteria are explicit; instructions are chunked and accessible.	Lesson walk data: 98% of lessons included clear success modelling; SEND anxiety referrals down 17%.	Reduces cognitive overload and improves confidence for anxious learners.
4. Engagement and Thinking	Cold calling, mini-whiteboards, and retrieval tasks ensure participation from all.	Learning walk analysis: thinking ratio increased 18%; lesson removal incidents down 13%.	Encourages voice and inclusion; participation strengthens emotional confidence.

5. Relationships and Regulation	Calm voice, visible regulation, and restorative follow-ups embedded. Students coached, not chastised.	CPOMS logs for “peer conflict” ↓ 21%; positive student–teacher relationships cited in 92% of survey responses.	Relational safety helps co-regulate students and model emotional control.
6. Ambition for All	Challenge is inclusive; teachers believe every student can succeed. “Essential for some, beneficial for all.”	Disadvantaged progress gap reduced by 0.23 (FFT); SEND attendance improved 2.1%.	Reinforces hope and resilience — key protective factors for mental wellbeing.

G. Attendance, Belonging and Wellbeing

Tier	Focus	Led By	Example Actions	Mental-Health Integration
Tier 0 – Universal	Whole-school belonging and routine.	Tutor / HOY	Attendance celebrated weekly; early-morning greetings; attendance boards; assemblies on resilience and sleep.	Promotes routine, structure and predictability, reducing anxiety and strengthening emotional regulation.
Tier 1 – Targeted Early Support (30 Missed Sessions)	Emerging patterns of absence.	HOY / Tutor / PSM	Family meeting; EBSA conversation; Wellbeing Den check-ins; PASP issued.	Addresses anxiety triggers, confidence, and social stress through practical strategies and emotional support.
Tier 2 – Coordinated Support (40 Missed Sessions)	Sustained or complex barriers.	HOY / SENCO / PSM	Thornden Hub discussion; joint plan with ELSA or MHST; reduced timetable where appropriate.	Multi-agency intervention targeting mental-health drivers such as depression, trauma or bereavement.

Tier 3 – Intensive Multi-Agency (50 + Sessions)	Chronic or high-risk absence.	DSL / SLT / External Agencies	Early Help Assessment; CAMHS referral; RHP or AP with reintegration plan.	Specialist involvement addressing complex psychological needs through joint risk planning.
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Leadership, Monitoring and Impact

- DSL & Deputy Head oversee integration of attendance, safeguarding, and wellbeing data through CPOMS dashboards.
- Student Voice & Parent Feedback used to evaluate belonging, safety, and support awareness.
- Staff CPD & INSET on trauma-informed practice, mental-health literacy, and restorative communication.
- Governor Oversight: half-termly reports triangulate attendance, wellbeing, and safeguarding outcomes.

Impact Data (2025):

- 19% reduction in wellbeing CPOMS incidents.
- 3-year rising attendance trend (93.5% → 94.7%).
- 91% of students feel safe; 88% confident discussing mental health.
- Persistent absence reduced to 12.8%, lowest in five years.
- MHST referrals resolved without escalation in 78% of cases.

Cultural Statement

“Every Thornden student is known by name, supported with compassion, and taught with consistency.

Mental health is everyone’s responsibility — embedded in our teaching, our relationships, and our daily routines.”

Thornden’s holistic approach means wellbeing is not reactive — it is proactive, preventative, and pervasive.

This is how we ensure that students do not just attend school — they *belong, aspire, and succeed.*

