



# Longridge High School

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## **Statement of Intent**

*“Mental health is a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”. (World Health Organization)*

We at Longridge High School believe that positive mental health and wellbeing is fundamental to educational attainment and social inclusion, linking into our shared vision of ‘Excellence and ambition, from all, for all’. Our ultimate aim is for our staff and pupils to feel happy, safe, supported and valued during their time with us.

## **Rationale**

In an average class of 30 15 year-old pupils:

- 3 could have a mental disorder
- 10 are likely to have witnessed their parents separate
- 1 could have experienced the death of a parent
- 7 are likely to have been bullied
- 6 may be self-harming

The Department for Education (DfE) recognises that: “in order to help their pupils succeed; schools have a role to play in supporting them to be resilient and mentally healthy”. There is good evidence to support this assertion and Ofsted has highlighted that children and young people themselves say that they want to learn more about how to keep themselves emotionally healthy. Moreover, schools have a duty to promote the wellbeing of students.

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/958151/Promoting\\_children\\_and\\_young\\_people\\_s\\_emotional\\_health\\_and\\_wellbeing\\_a\\_whole\\_school\\_and\\_college\\_approach.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/958151/Promoting_children_and_young_people_s_emotional_health_and_wellbeing_a_whole_school_and_college_approach.pdf)

**Keeping Children Safe in Education 2022 states that with regards to Mental Health: -**

45. All staff should 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.

46. Only appropriately trained professionals should attempt to make a diagnosis of a mental health problem. Education 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. Schools and colleges can access a range of advice to help them identify children in need of extra mental health support, this includes working with external agencies.

47. 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 designated safeguarding lead or a deputy.



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The COVID-19 pandemic has had a negative impact on many people across the country. Longridge High School has seen a significant rise in pupils struggling with a host of mental health and emotional issues, and those being referred to our school counsellor (71 pupils in the first term following the return to school after the COVID-19 school closure), which is around the number of pupils that would normally be seen across a whole school year). This has meant that as a school we have had to look more closely at and increase our provision. Changes to staffing has also meant that some members of staff have now upskilled to fill the gaps in our provision in school.

### **Aims of this policy**

- Longridge High School aims to support all pupils and staff in maintaining positive mental health and wellbeing. This will be achieved by the fostering of excellent relationships across the school community.
- To encourage our children and young people to seek help when their emotional health changes.
- Ensure our staff feel supported and that they are aware of what help is available to them should they need it.
- Work with parents and outside agencies to provide the best possible support for our young people.
- Early intervention and prevention of serious issues developing in both our pupils and staff
- Provide different levels of support in school for both staff and pupils, and create safe spaces for pupils who need to talk or to retreat to if in need of some timeout.
- To avoid discrimination based on mental health related illnesses or disorders.
- Promote positive mental health activities and self-care, so that pupils learn to manage their emotions and are able to understand and express their feelings. This will lead to more confident and resilient young people who have a greater capacity to learn and cope with stress.
- Increase the awareness and understanding of mental health to reduce the stigma related to mental health amongst our school community.
- Put in place supportive measures for those experiencing negative changes to their mental health.



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## **How we will achieve our aims**

- Ensure all members of our school community feel valued.
- Through having Leadership and management that supports and champions efforts to promote emotional health and well-being.
- An ethos and environment that promotes respect and values diversity.
- Identifying need and monitoring the impact of interventions.
- By having a whole school approach to promoting positive mental health and wellbeing within an ethos of high expectations and ongoing support.
- Targeted support and appropriate referral.
- Enabling staff to respond to early warning signs of mental-ill health in pupils.
- Curriculum teaching and learning to promote resilience and support social and emotional learning.
- Enabling student and staff voice to influence decisions, activities and focuses.
- Robust support systems in school, and close links with outside agencies to ensure our pupils and staff can access the appropriate level of help when needed.
- Well planned and engaging PSHE lessons, assemblies and themed weeks celebrating mental health and wellbeing.
- Encouraging kindness and building of resilience throughout our pupils and staff.
- Ensuring that staff have a voice in relation to mental health and wellbeing in the workplace through our staff wellbeing group.
- Addressing the CPD needs of our staff so that they are equipped to support pupils when called upon.
- Establishing peer support groups and training pupils to mentor others.

## **How we will support pupils**

All staff have a responsibility to promote positive mental health, and to understand about protective and risk factors for mental health. Some pupils will require additional help and all staff should have the skills to look out for any early warning signs of mental health problems and ensure that pupils with mental health needs get early intervention and the support they need. Staff should ensure that they report any concerns in a timely manner, and ensure that they have recorded their concerns on 'Safeguard'.

We believe in managing each case in its own right and understand that there is no one fit for all mental health issues. We encourage our young people maintain regular routines, such as attending school and lessons, as we believe this to be a key part of maintaining positive mental health.



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## **Who will help to achieve this?**

Currently, school has a number of dedicated staff working with our young people to support them with their mental health and well-being. They are:-

Mrs K Rogers – Senior Mental Health Lead / Deputy DSL / Mental Health First Aid Level 3  
Mr K Sutcliffe – Designated Safeguarding Lead (DSL)  
Mr R Elder - SENDCO  
Mrs R Jackson – Head of Year 7  
Mr C Mochan – Head of Year 8  
Miss K Stemp – Head of Year 9  
Mrs N Taylor – Head of Year 10  
Miss K Webster – Head of Year 11  
Mrs R Edwardson-Pye – Pastoral Support Officer (Year 7 & 8)  
Mrs J Mills – Pastoral Support Officer (Year 9)  
Mrs S McCann – Pastoral Support Officer (Year 10 & 11)  
Ms L Murdock – Pastoral Liaison Officer / Early Intervention / Mentor / Blossom Tree Co-ordinator  
Ms C Shorrock – Early intervention / Mentor / Menopause Champion  
Mrs S Evans – Early intervention / Mentor / Mental Health First Aid Level 3  
Mrs J Singh – School Counsellor  
Ms Angela Fletcher – School Nurse

## **What we will look out for**

School staff may become aware of warning signs that indicate a student is experiencing mental health or emotional wellbeing issues. These warning signs should always be taken seriously and staff observing any of these warning signs should communicate their concerns with our Mental Health Lead, DSL or the pupils Head of Year. Parents may also see these signs in their own child. They should contact school or their own GP for help and advice.

### **Possible warning signs include: -**

- Physical signs of harm that are repeated or appear non-accidental
- Changes in eating or sleeping habits
- Increased isolation from friends or family, becoming socially withdrawn
- Changes in activity and mood
- Lowering of academic achievement
- Talking or joking about self-harm or suicide
- Abusing drugs or alcohol
- Expressing feelings of failure, uselessness or loss of hope
- Changes in clothing – e.g. long sleeves in warm weather
- Secretive behaviour
- Skipping sport or getting changed secretly
- Lateness to or absence from school
- Repeated physical pain or nausea with no evident cause
- An increase in lateness or absenteeism



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This is not an exhaustive list and if parents, carers or staff are concerned they should contact the Senior Mental Health Lead, Designated Safeguarding Lead (DSL) or the pupils Head of Year.

If there is a fear that the student is in danger of immediate harm then the normal child protection procedures must be followed with an immediate referral to the Designated Safeguarding Lead (DSL) or deputies if the DSL is unavailable. If the pupil presents a medical emergency then the normal procedures for medical emergencies must be followed, including alerting the Pastoral Office, first aid staff and contacting the emergency services if necessary. If there any concerns about a pupils safety and welfare, we must ensure that all checks have been made, the relevant staff have been notified of the concern and their family have been contacted prior to the pupil leaving the school site.

Where a referral is required, including to Child & Adolescent Mental Health Services (CAMHS) or other external agencies; this will be led and managed by the Senior Mental Health Lead. Staff referrals to occupational health or other agency support for mental health and wellbeing will be led and managed by the Headteacher and/or Business Manager.

## **Our offer to pupils: -**

### **Universal Support**

This means ensuring all children are safe, happy and free from bullying which will have a significant impact on pupil wellbeing. All of our pupils are therefore supported in the following ways: -

- Our Heads of Year, Form Tutors and year group team, Pastoral team and attendance officers are key in the early identification of mental health issues and for putting in place interventions to help our pupils.
- Access to well-planned and engaging PSHE lessons to educate our pupils about mental health issues and how to manage their own mental health.
- Access to **mentoring** as an early intervention to prevent mental health issues escalating (accessed through our own internal referral system).
- Access to our **school counsellor** to help those experiencing poor mental health to develop strategies to help them cope with the changes (accessed through our own internal referral system).
- Through our SENCO, pupils can be referred to an educational psychologist, our specialist ASD teacher or have access to a tutor to alleviate the stress and anxiety that may be caused by any additional needs, learning or educational difficulties.
- **School Nurse Service** – Virgin Care have a service level agreement with Lancashire County Council to work with schools in the county. We can refer into this service for pupils showing early signs of a mental health issue.
- **TAPP (Trainee Associate Psychological Practitioner)** – based in local GP surgeries and can work with pupils in the early stages of a mental health issue developing.
- **CAMHS Primary Mental Health Worker (PMHCW)** – We have access to support from a PMHCW from Preston CAMHS. This means that we can look to them for advice on finding the right pathway for our young people.



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## **Selective / Targeted Support**

This is for targeted groups or pupils identified as having an increased risk of developing a mental health disorder or illness. Selective interventions can have the biggest impact on pupils struggling with poor mental wellbeing. To support our pupils who have been identified as presenting with a mental health issue we can offer access to or referrals into the following services: -

- School Nurse Service (Virgin Care)
- TAPP (Trainee Associate Psychological Practitioner)
- Action for Children
- Local Youth workers / youth groups
- Brook
- Bereavement support
- Blossom Tree project (more details later)
- Targeted Youth Support (TYS – more details later)
- LGBTQ+ Group Local
- Youth workers / youth groups
- Kooth (this is an online mental wellbeing community where young people and their families can access free, safe and anonymous support).

## **Indicative/Specialist Support**

This level of support is usually external agencies, such as CAMHS, or charitable organisations that provide often therapeutic support. We pride ourselves in having close links with our local mental health support teams, and work closely with them to ensure the best level of care is received by our pupils. Referrals can be made to these services when other interventions have been tried first but there are still some unmet needs or difficulties being experienced by our young people. Agencies that we work in partnership are: -

- CAMHS
- Child Action North West (CANW)
- Child & Family Well-being Service (CFW)
- Children and Young People's Wellbeing Practitioner (CYWP)
- N-Compass – Butterfly and Phoenix Project
- GPs
- Children's Social Care
- START (Specialist Triage Assessment and Referral Team)
- Action for Children
- Brook
- Eating Disorders Service
- Early Intervention Service



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## Child & Adolescent Mental Health Service (CAMHS)

CAMHS work closely with schools and have increased their support with the allocation of a Primary Mental Health Worker to schools in the district. CAMHS use the 'Thrive Model' (below) when looking at how best to support young people: -



Practitioners involved at each stage	
<ul style="list-style-type: none"> <li>Form Tutor</li> <li>Head of Year</li> <li>Mentors</li> <li>Senior Mental Health Lead</li> <li>Designated Safeguarding Lead</li> <li>SENCo</li> <li>Specialist Teachers</li> <li>School Nurse</li> <li>Kooth</li> <li>Youth Mental Health First Aiders</li> <li>PMHW</li> </ul>	<ul style="list-style-type: none"> <li>School Counsellor</li> <li>School Nurse</li> <li>Kooth</li> <li>EHA / CFW / CANW</li> <li>Encompass</li> <li>PMHW</li> <li>GP</li> <li>Tried and Tested Strategies</li> </ul>
<ul style="list-style-type: none"> <li>CAMHS</li> <li>RAIST (Rapid Assessment Intensive Support Team)</li> <li>A&amp;E if needed</li> <li>Police if needed</li> <li>Children's Social Care</li> </ul>	<ul style="list-style-type: none"> <li>CAMHS</li> <li>CPS</li> <li>Eating Disorders Service</li> <li>Early Intervention Service</li> <li>Children's Social Care</li> <li>CFW</li> </ul>

CAMHS are able to offer support from a number of Mental Health Workers, Therapists, Psychologists and Psychiatrists, as well as specialist ADHD and ASD nurses and Family therapists.



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## **Signposting**

In addition to us making referrals on behalf of our pupils and their families, we will also signpost parents to some of the agencies above in order for them to self-refer. We also recommend the following online resources: -

### **Mental health advice for young people, by young people**

<https://www.childrensociety.org.uk/mental-health-advice-for-children-and-young-people/issues-affecting-young-people>

### **Mental health support for young people**

<https://www.mind.org.uk/>

<https://youngminds.org.uk/>

<https://www.kooth.com/>

<https://www.lscft.nhs.uk/Mindsmatter>

<https://www.headstogether.org.uk/>

<https://www.anxietyuk.org.uk/>

<https://www.childline.org.uk/kids/>

<https://www.childline.org.uk/toolbox/calm-zone/>

<https://www.annafreud.org/>

<https://www.mentallyhealthyschools.org.uk/>

Childline Phone Number – 0800 1111

### **How parents and carers can help support mental health**

<https://www.mentalhealth.org.uk/publications/make-it-count-guide-for-parents-and-carers>

### **Support on all parenting issues and mental health -specific to teenagers**

<https://www.mumsnet.com/teenagers>

<https://www.mumsnet.com/teenagers/mental-health-issues>

### **Support for families**

<https://mindedforfamilies.org.uk/#/>

<https://www.thecalmzone.net/> (Campaign Against Living Miserably – advice for Men)

### **Breathing exercise for stress**

<https://www.nhs.uk/conditions/stress-anxiety-depression/ways-relieve-stress/>

### **Mindfulness**

<https://www.nhs.uk/conditions/stress-anxiety-depression/mindfulness/>

<https://www.calm.com/>

<https://www.headspace.com/>

### **Safeguarding**

Childline - 0800 1111 <https://www.childline.org.uk/>

NSPCC – 0808 8005000

<https://www.nspcc.org.uk/>

[help@nspcc.org.uk](mailto:help@nspcc.org.uk)





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## **Our in-house selective support groups**

### **The Blossom Tree Project**

#### **Objectives**

- To learn new skills or increase existing skills in different activities e.g. through dance/exercise, drama, creative tasks, jewellery making, performance skills, group work etc.
- To take part in activities as a diversion away from harmful behaviour.
- To set personal challenges and overcome fears.
- To celebrate personal strengths and qualities to improve self-awareness self-esteem and confidence.
- To increase knowledge of personal safety including issues around drugs, alcohol, cyber-bullying, internet safety etc.
- Improve self-esteem and overall attendance and behaviour in and out of school.
- To increase knowledge and understanding of issues that affect young people, such as eating disorders and self-harm.
- To understand about appropriate and inappropriate relationships.
- To increase awareness of sexual health issues and know how to access sexual health services
- To empower young people to make informed choices.
- To develop relationships with other young people and adults.
- To signpost to other agencies if necessary.

This early support project will address the needs of targeted young people who attend Longridge High School. This is so that they can take advantage of physical, social and recreational activities that will help them to overcome social disadvantages in order to improve their quality of life and divert them away from activities or behaviour which may be detrimental to their health and well-being.

Support will be met by project leaders and various local support agencies which may include Targeted Youth Support, Police, Arts and crafts etc. in order to give education and support on issues to meet their needs - sex and relationships, grooming and sexual exploitation, alcohol and drugs awareness, eating disorders, self-harm, internet safety etc. This will enable participants to realise the dangers and make informed choices to keep themselves safer.

We will provide a relaxed and informal space where young people feel comfortable and welcomed. We will provide refreshments and all necessary resources to deliver the programme of activities. In addition to the delivery by project leaders, specific workshops have been identified as being beneficial to address their needs through a holistic approach, giving them a wide variety of experiences to impact positively on their health and well-being and overcome any disadvantages they may be experiencing.

Therapeutic art sessions provides an excellent way of improving self-esteem and encouraging confidence and self-expression. It develops individual skills and the ability to work with and relate to others. It will teach young people about empowerment - what it is and how to give it to ourselves, how stereotypes affect our self-esteem and what constitutes a positive role model. Good communication is vital in society



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and increases one's ability to show empathy, promote awareness of others, and build assertiveness and resilience which young people can use successfully as they move towards independence.

The young people will be identified as needing support through current poor attendance, poor behaviour, low-self-esteem, and confidence issues etc. The groups will be no more than 10 which will run for 12 weeks which will be after school 3.10pm - 5pm.

### **How do we know it has had a positive influence on pupils?**

- Increased attendance
- Improved behaviour and attitude in and around school
- Impact on overall GCSE results.
- Improved relationships with teachers.
- Willingness to learn and attend revision classes, improved friendships with others.

### **Feedback from pupils**

#### **1. How did you enjoy the sessions?**

The best, helps when you are feeling down, makes me feel happy, less stressful, the sessions are fun and a safe place where you can be yourself, makes me feel better, fab environment, since I have been coming to the Blossom Tree I've been more comfortable about talking to people when I need to.

#### **2. Do you feel that you can talk about how You feel and that you are listened to?**

Yes, very understanding and supportive, support is always there, I feel listened to and very comfortable, nobody judges you, you can talk about anything and it's private. No matter how big or small your worries are always listened to.

#### **3. Do you feel positive and able to deal with situations better?**

Made me think my actions through before reacting, I feel more confident in myself, taught how to deal with situations better, feel more positive.

#### **4. Have these sessions been valuable to me and my learning?**

Start to see progress within myself, started coming back into school. The sessions made me feel more like myself, the sessions made you teach you how to cope with stress, 100% positive atmosphere and motivates you!



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## **Youth Targeted Support group (also known as TYS)**

- Have delivered programmes to groups of 8, for Year 9 boys, Year 9 girls and Year 8 girls.
- The focus of the groups are to help young people with self-esteem and body image to support young people build self-esteem and resilience.
- Work on 'Friendships and Relationships' - to have increased knowledge around relationships with others and what makes the relationships positive and how to build these.
- Boys Mental Health Group – this group will be set up to work with approx. 7 boys to talk about their mental health and emotional wellbeing.
- Mental health groups for Year 8 and 9 pupils – to give young people an age appropriate understanding around emotional and mental wellbeing, understanding and managing feelings and anxiety. Coping mechanisms will be explored and services appropriate and available to young people will be shared.
- The groups are evaluated at the start and finish using a radar to measure the impact the programme has had on the young people taking part.

## **Butterfly & Phoenix Project**

- The Butterfly and Phoenix Project have delivered a 6 week programme in school focussing on bereavement with a group of pupils who have recently lost close family members.
- They also offered 1-1 counselling sessions for the group of young people who attended the group but still needed support.



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## Assessment

Staff will take into consideration a number of factors when assessing a young person's mental health and well-being. Parents may express concern, triggering school to start interventions. Friends or other pupils who feel that there are worrying changes to a pupil's mental well-being may raise concerns. Staff will not diagnose, but where there are concerns of an emotional wellbeing issue, suspected mental illness or the needs of the pupil that cannot be met by school, referrals will be made to the appropriate professionals or outside agency.

We will use the following as an indicator of a pupil's mental well-being when they are first brought to our attention. This will enable us to make decisions on the level of support given to them in school or whether an immediate referral is warranted.

The flow chart uses a red, amber & green system to identify students' mental health state and how it should be addressed. The framework categorises many different types of behaviours that could be present in students, along with recommendations on what staff should do.

- The green category identifies students who have a positive mental health and are coping well with day-to-day issues.
- Amber shows behaviours that are beginning to become a concern and gives staff advice on how to support students.
- The red category outlines behaviours of somebody who is having extreme issues with their mental health and needs urgent intervention.

*Created by Dayne Meakin, SSAT Leadership Legacy Fellow, 2018*



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LEVEL OF FUNCTIONING	COGNITIVE AND ACADEMIC FUNCTIONING	SOCIAL FUNCTIONING	COPING BEHAVIOURS	PSYCHOLOGICAL FUNCTIONING	RESPONSE AND RECOMMENDATIONS
Superior/good functioning in a wide range of activities. Can identify short and longer term plans for the future.	High achieving. Performing well in the workplace/studies. Concentrates on tasks and seems alert. Generally attends school on time Study/work capacity fulfilled.	Engaged in a range of activities. Positive relationships with peers. Displays emotional warmth. Spends time in social activities. Energy to perform the majority of daily tasks required.	Positive coping skills. Good functioning overall. Able to consider problems/issues in an appropriate fashion.	No or minimal symptoms, resilient, generally happy. May have mild anxiety in response to events (e.g. exams). Describes enjoyment in several different activities.	Keep socially active. Make plans for periods of enjoyment. Nutrition is important for all aspects of health. Regular physical exercise to help maintain mental wellbeing.
Temporary impairment. Symptoms may be understandable in the circumstances (e.g. exam stress, bereavement). Generally functioning in several areas of life.	Capable student who is experiencing transient problems. May have temporary setbacks due to challenge of unfamiliar academic/work task. May demonstrate reduced self-confidence/decreased self-esteem. May use avoidance as a safety mechanism May have reduced level of concentration.	Occasional arguments. Minor ups and downs in relationships. Engaged in social situations with peers. May withdraw briefly.	Understandable stress reaction to difficult situations. Returns to normal once situation resolved. Increase in level of irritability.	Period of understandable low mood or irritability. Anxiety symptoms such as brief sleep or appetite disturbance. Worrying thoughts. Thoughts of inability to cope.	Offer support and problem solving/peer support. Encourage to talk to a trusted friend. Speak to colleague such as form tutor, Head of year or Senior Pastoral leader. Pastoral team may wish to contact parents to express concern if necessary.
May appear disorganised and unreliable. May be denying any problems or responsibilities for behaviours. Unlikely those issues will resolve without Intervention. Action required to prevent further distress	Impaired ability due to reduced concentration and learning capacity. Unable to prioritise tasks. Difficulty meeting lesson and school Requirement. Conflict in group work or situations. Altered decision making. Inconsistent behaviour. Worrying or anxious thoughts. May appear vague Changing beliefs.	Few friends, limited integration in team processes. Conflict with peers/staff. May be withdrawn or isolated. Increased hours on internet. Behaviour may be having a negative effect on others. Others may express concern or make complaints. Generating rumours, which cause concern to others. Low level use of written, verbal or physical abuse (e.g. pushing or shoving). Concerning or unwelcome comments of a sexual nature or relationship seeking. Out of character behaviours/out of context Behaviour.	Poor coping. May be demanding of others to find solution. Overall functioning compromised. Inappropriate, changeable emotional expression (e.g. tearful or aggressive outbursts). Excessive online chat and other internet activity. Impulse control problems may lead to high risk behaviours (e.g. unsafe sex, overspending, gambling, self-harm or harm to others). Intentional theft. Damage to property. Threatening communications which make you feel uncomfortable. Recent improvements in mood or daily motivation after a period of low mood.	Feel out of control or have panic attacks. Increase/decrease sleep. Impaired judgement and decision making. Impaired organisation. May appear chaotic. Fear regarding poor performance/letting others down. Thoughts of escaping. Any thoughts or expressions of suicide/any non-suicidal self injury/harm to others, Difficulty making plans for longer term. Limited/reduced hope for future. Depression. Change in levels of energy. Thoughts/behaviours out of context or character. Guilt/Anger/blaming others for how they feel. History of harm to self or others. Past mental health presentations/admission to hospital. High anxiety, distress/agitation.	Needs psychological assessment and Intervention. Encourage them to talk to their family and close friends for support. May help to discuss current or future workload. Contact designated safeguarding lead / Mental Health Lead immediately. Designated safeguarding lead / Mental Health Lead will follow safe guarding policy



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**Initial Assessment Proforma**

Factor	RAG Rating	Comments
<b>Level of Functioning</b>	R	
	A	
	G	
<b>Cognitive and Academic Functioning</b>	R	
	A	
	G	
<b>Social Functioning</b>	R	
	A	
	G	
<b>Coping Behaviours</b>	R	
	A	
	G	
<b>Psychological Functioning</b>	R	
	A	
	G	
<b>Response and Recommendations</b>	R	
	A	
	G	



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**Request for Service**

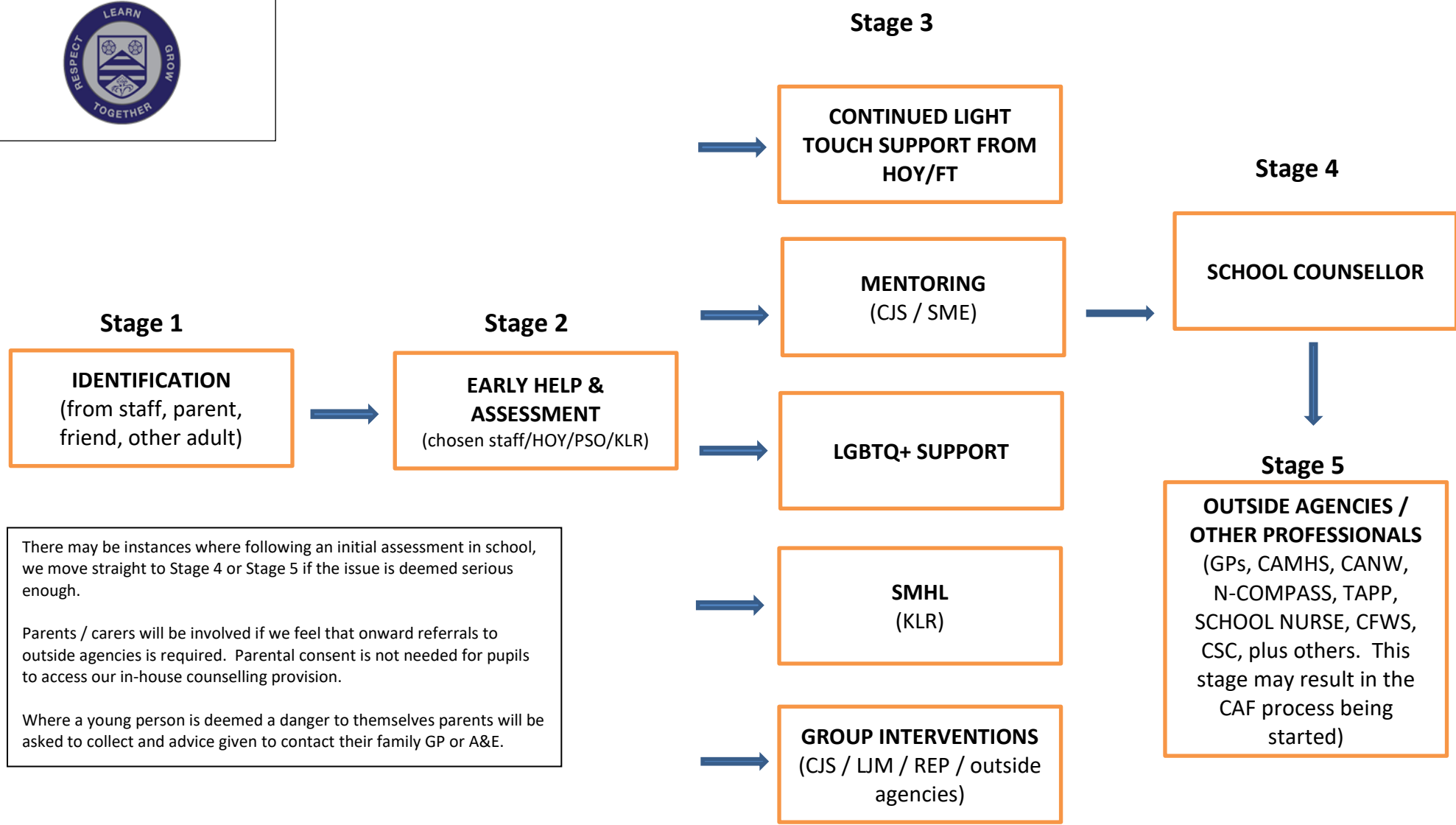
<b>Which service do you require (highlight as appropriate)</b>	Mentoring School Counsellor Blossom Tree / UCan CAMHS (due to parents not having self-referred) Butterfly & Phoenix Project (Preston based pupils only) Child & Family Well-being Support (LJM) CAF assessment (LJM)
<b>Reasons for referral</b>	
<b>Previous interventions and timescale of those interventions</b>	

**Longridge High School  
Mental Health  
Support Map  
Pupils**



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There may be instances where following an initial assessment in school, we move straight to Stage 4 or Stage 5 if the issue is deemed serious enough.

Parents / carers will be involved if we feel that onward referrals to outside agencies is required. Parental consent is not needed for pupils to access our in-house counselling provision.

Where a young person is deemed a danger to themselves parents will be asked to collect and advice given to contact their family GP or A&E.