

## Child/Family referral to Pastoral Care Team

This is an internal referral made by the classteacher to the Pastoral Care Team when a concern has become apparent.

**Please note: This form is not to be used for safeguarding concerns.**

**All safeguarding concerns must be reported immediately to the Named Child Protection Staff Member using APPENDIX B – RECORD OF CONCERN in the Safeguarding & Child Protection Policy 2015/16.**

Named staff:

- ) Julie D'Abreu Headteacher
- ) Rachel Bates Assistant Head
- ) Tina Georgiades Assistant Head

### **PROCEDURE**

1. Class teacher or other member of staff to complete first section of the attached form and pass to the Assistant Head of the phase the child is in.
2. Assistant Head to complete the second box and add any further information to the form.
3. Assistant Head will send the form to the Pastoral Care Coordinators copying in Julie D'Abreu and Rachel Bates.
4. Pastoral Care Team to confirm receipt of referral to the child's Classteacher.
5. Within two weeks of the referral an initial meeting will be convened with actions and responsibilities from the meeting agreed.
6. A six week review meeting will be booked.
7. Evaluation of this procedure and the outcomes for the child/family will be completed by Rachel Bates, Assistant Head for Inclusion and Pastoral Care.

**CHILD/FAMILY INTERNAL REFERRAL TO PASTORAL CARE TEAM**

**TO BE COMPLETED IN ELECTRONIC FORMAT ONLY**

Member of staff making referral:
Date:
Child's name:
Class:
Reason for referral: (please bullet point your reasons for referring the child/family)
List interventions that have already been put in place.
What would a successful outcome of the referral be?
AHT Name:
Date referral received:
PCC Name:
Date referral received:
Action taken:
Follow up action/date of review: