

RISE referral guide for Gateshead/Newcastle schools













Introduction

This booklet aims to support educational professionals within Gateshead and Newcastle area to access the RISE Mental Health Support Team within their School or College. Enclosed you will find information about the RISE service and how to access this for Children and Young People within your school.

Need urgent support?

A mental health crisis is an emergency that has a direct and immediate threat to your physical or emotional well-being. In these situations, it's important to get help quickly.

Try to stay calm and ask someone for help if you need it. It could help to tell someone you trust, maybe a family member or a friend. They can be with you and help you decide what to do. They can also contact services on your behalf.

If there is any immediate risk to life, contact the emergency services by calling 999.

Contents

Page 1	What RISE can offer
Page 2	Understanding the role of an EMHP
Page 3	The Referral Process
Page 4	Referral Process Flow chart
Page 5-12	PDF Referral form
Page 13-20	RISE delivery options - Menu of support.
Page 21	Example of a RISE school delivery timetable
Page 22-25	Frequently Asked Questions
	Appendix
Page 27	Safeguarding & working with schools checklist document
Page 29-31	PDF Information on GDPR
Page 32-35	PDF information sharing and consent form
Page 36	The Initial Assessment process



What RISE can offer



The RISE team offer a range of interventions to support young people's mental health needs, including one to one work with individuals and small group work. Sessions focus upon supporting individuals to face and manage difficulties through developing understanding of wellbeing needs as well as coping strategies and skills. The RISE team can offer interventions and support for the following:

- worry management
- anxiety,
- panic,
- low mood.
- self-esteem
- emotional literacy
- emotional regulation
- friendship
- sleep





The RISE team use a Whole School Approach to mental health support. This approach aims to support schools to recognise their individual mental health needs and allows us to work collaboratively to agree upon a package of support for these areas of need whilst complimenting what is already in place in schools.

As part of the whole school approach RISE offer 1 day of weekly support over 8 weeks, comprised of 4 separate sessions within that day, which can be made up from the following:

- Assemblies
- Training for staff or Parents
- Workshops (10+ young people)
- Advice/consultation with school staff including signposting to other services
- $\bullet~1\,x\,1:1\,session$ with an individual student lasting for at least 6 weeks.
- Small group work (4-6 young people) on an area of focused need.

In utilising a whole school approach RISE aims to reach a wider audience of Children and Young people. Whilst also supporting school professionals and Parents/Carers to further develop understanding and practices to support children and young people with their mental health.

Prior to any RISE delivery we require you to understand and support our safeguarding agreement and processes. Please read the 'Safeguarding & working with schools checklist document' found on the following page.

1

Understanding the role of the EMHP



Education Mental Health Practitioners (EMHPs) are trained to assess and support children and young people with common mental health difficulties. EMHPs provide early, brief, evidence-based low intensity interventions such as guided self-help based on cognitive behavioural therapy (CBT) and group-based CBT.

EMHPs also support schools and colleges to improve mental wellbeing for students through preventative education. EMHPs do not provide counselling and are not Counsellors.

(Low intensity CBT, signposting) (Counselling/d Low mood Irritability (which may present as anger) Chronic depression or a management Worry management and problem solving Low confidence or Interpersonal challenges e.g., with peers Relationship issues – un counselling Exam stress, school transition Example 1	
Worry management and problem Low confidence or Interpersonal solving challenges e.g., with peers management counselling	nger
Worry management and problem solving Low confidence or Interpersonal challenges e.g., with peers Relationship issues – uncounselling	
solving challenges e.g., with peers counselling	
	able to provide
Exam stress, school transition	
Anxiety/avoidance e.g., separation Some short-term exposure work Extensive/complex pho	
anxiety, minor social anxiety, simple medical/bodily, agoraph	nobia)
phobias (e.g., animal/situational) Anxiety disorders	
A history of self-harm – not currently Thoughts of self-harm, superficial self- Severe, active, high risk	self-harm
active. harm, basic harm reduction techniques	
Supporting alternative coping Suicidal ideation, plan a	nd intention
strategies. Suicidal thoughts	incompie
Sleep hygiene PTSD, trauma, nightman Thought challenging – negative	es, insomma
automatic thoughts	
Parent/carer and professional training	a a
to support interventions	g
Low level psychoeducation e.g., Emotional regulation - effectively	
noticing and naming emotions, managing and responding to an	
recognising what they feel like (body emotional experience	
mapping), the role of thoughts/cycle,	
relaxation strategies	
Mid/early onset obsessive compulsive Moderate/severe OCD	
disorder (OCD)	
Children displaying rigid, ritualistic Moderate/severe attac	hment disorders
behaviour that may or may not be	
within a diagnosis of ASD Assessment and diagno	
developmental disorder	rs and learning
difficulties	
Mental Health difficultie	
undiagnosed neurodeve	elopmental
need.	
Pain management Historical or surrent ave	norioneo ef
Historical or current exp	belience of
Disordered eating and o	liagnosed eating
disorders	nagnoseu eating
Bereavement	
Behavioural difficulties,	conduct
disorder, full parenting	
I disorder till parenting	programme



Referral Process

Prior to any young person' accessing RISE support in the form of 1:1 or small group work, we require the following forms to be completed and submitted to us:

- Information Sharing and Consent
- Newcastle and Gateshead RISE Consent form
- RISE Online Referral Form

GDPR PDF found on page 25-27 https://bit.ly/RiseConsentForm https://bit.ly/RiseReferralForm

PDF versions can be found below for your awareness as to what each form will ask and what information will be required.

The option is available to complete and submit Newcastle and Gateshead RISE Consent form online as above or to share completed paper copies with RISE once completed and returned by Parents/Carers or young person where appropriate. Paper copy of this form can be printed from pages 28 to 29 from this document to facilitate this.



Trouble shooting:

For confidentiality reasons our online referral form will time out if you do not continually input to it. To make form completion as easy as possible we suggest using a word document alongside the online form. Allowing you to save details ahead of inputting and submitting on the final online referral form. This will also allow you to copy and paste all details with ease where the form may ask for them to be repeated.

GP details are essential information and so we cannot accept a referral without this information.



Referral Process Flow chart



This process must be followed for any referral for 1:1 or small group work.

If you are unsure about the suitability of a young person for RISE 1:1 or group work support, please contact your EMHP and they will advise you on best action.

School to discuss potential referral with young person and Parents/Carers if under 16. If inappropriate for Parent/ Carer involvement school can just discuss with young person where aged 13 + and deemed Gillick competent.



School to give Parents/Carers the 'Information Sharing and Consent GDPR PDF document' to read and understand how information is used and stored by The Childrens Society. Parents/Carer to give verbal or written response to school that they have read and are in agreement with document.



Parents/Carers and young people must complete 'Newcastle and Gateshead RISE Consent Form' and submit this online. If not appropriate for guardian to complete young people can complete independently and give consent where aged 13 + and deemed Gillick Competent.



The RISE Online Referral Form must be completed by school in collaboration with Parents/Carers or young person if appropriate and submitted.



Once received, referral is screened by EMHP and RISE manager to ensure young person's suitability for RISE intervention.



Referral accepted

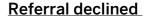
to arrange Initial
Assessment.



 $\sqrt{}$

May require further information from school/ parent/young person to make decision. EMHP may offer Initial assessment to gather information and following this accept or decline referral.





If RISE support would not be appropriate for young person due to their needs.



EMHP will communicate any referral outcome decision with school and parents and discuss this with young person where they meet support signposting to appropriate support.



This PDF Referral form can be used to support referrers in understanding what information is required as part of a referral. However, referrers can only submit referrals using the online referral form for confidentiality and GDPR purposes.

To complete an online referral, go to:

https://bit.ly/RiseReferralForm

RISE works in schools and colleges across Newcastle and Gateshead to support children and N.B. This referral will not be accepted without the young person's young people (aged 5-18) with their emotional well-being and mental health. RISE Referral Form 35 The Children's RISE Society **GP Details**

 The information that is included in this referral form will be shared with The Children's Society to help make a decision about how best to provide relevant services and assistance. You can review our full 	privacy policy by selecting "I want to read the privacy notice" below. Once you have read it you can then select 'I agree' or 'I do not agree'.
---	---

2

By selecting 'I Agree' you are confirming that you have read and have accepted our privacy notice and give consent

		ì
		¢
		-
	1	
	(
		_

	₫
	_
	C
	π
	u
٠	-
	τ

I want to read the privacy notice



Required



Privacy Notice

The information that is included in this referral form will be shared with The Children's Society to nelp make a decision about how best to provide relevant services and assistance.

and information will only be shared with the people involved in making a decision about helping By providing this information you agree to it being used in this way. The referral form is secure ndividual may be at risk of harm, then the information will be shared with others to provide and providing relevant services. If the form contains information that suggests you or an necessary support.

about how your personal information is used to provide help and a wide range of assistance. For Once you are working with the The Children's Society, they will give you detailed information further information contact The Children's Society's Data Protection Officer: data-<u>protection@childrenssociety.org.uk</u>

The Children's Society

Whitecross Studios

London EC1Y 8ST 50 Banner Street

Charity Registration No. 221124

The Children's Society with the charity no. 221124 and data controller number: Z7088095.

2. By selecting 'I Agree' you accept privacy notice

○ I agree

1 disagree

End of Form

As you have disagreed to the privacy notice, we cannot take your referral any further

_
10
_
. ou
4
~
2
4
+
=
.=
>
_
a
_
+
=
پ
_
0
O
_
\simeq
Τ.
Ħ
₹
50
>
_
e
ger
nger
onger
longer
lond
lond
no longer
u no long
u confirm you no long
u no long
u confirm you no long
u confirm you no long
u confirm you no long
u confirm you no long
Can you confirm you no long
u confirm you no long

○ Yes

2

with The Children's Society to help make a decision about how best to Once you have read it you can then select 'I agree' or 'I do not agree' privacy policy by selecting "I want to read the privacy notice" below. 4. The information that is included in this referral form will be shared provide relevant services and assistance. You can review our full

By selecting 'I Agree' you are confirming that you have read and have accepted our privacy notice.

○ l agree

○ I disagree

I want to read the privacy notice

6



10. Referrer's Telephone Number *		11. Referrer's Email Address *			12. Address (including Postcode) *						
this referral is for: *				(XXXX)							
5. Please confirm whether this referral is for: *	Group Work	One to One Support	6. Date *	Please input date (dd/MM/yyyy)		7. Name of Referrer		8. Referrers Role *		9. School *	

Details of Referral

Other

Child/Young Person's Details

13. First Name *

Asian/Asian British, Bangladeshi

Asian/Asian British, Chinese

17. Ethnicity *

		Asian/Asian British, Other Asian Asian/Asian British, Other Asian Black/Black British, African Black/Black British, Caribbean Black/Black British, Other Black Mixed/Multiple ethnic groups, Any other mixed Mixed/Multiple ethnic groups, White/Asian Mixed/Multiple ethnic groups, White/Black African Other Ethnic Groups, Any other ethnic group Other Ethnic Groups, Arab	
Prefer not to say		Other Ethnic Groups, Gypsy/Romany/Irish Traveller White, British White, Irish	
() Prefer not to Say		Other Ethnic Groups, Gypsy/Romany/Irish Traveller White, British White, Irish White, Other white	
0	(Other Ethnic Groups, Gypsy/Romany/Irish Traveller White, British	
		Other Ethnic Groups, Gypsy/Romany/Irish Traveller White, British	
		Other Ethnic Groups, Gypsy/Romany/Irish Traveller	
	Other Ethnic Groups, Gypsy/Romany/Irish Traveller White, British White, Irish		
		Other Ethnic Groups, Any other ethnic group	
		Mixed/Multiple ethnic groups, White/Black African	
		Mixed/Multiple ethnic groups, White and Black Caribbean	:
		Mixed/Multiple ethnic groups, White/Asian	
		Black/Black British, Other Black	
		Black/Black British, Caribbean	
		Asian/Asian British, Pakistani	
		O Asian/Asian British, Other Asian	
		Asian/Asian bitush, mulan	
		Acian/Acian British Indian	

18. /	18. Address (including Postcode) *	
		24. Name of GP Surgery *
		(We cannot accept any referral without this information)
19. Р	19. Parent/Carer Name *	
20. F	20. Parent/Carer Contact Number *	
21. F	21. Parent/Carer Email Address *	
22. F	22. Preferred Language *	
23. F	23. Religion *	

30. a copy of our leaflet/website 31.		Current Concern
30. son a copy of our leaflet/website found 31.	25. Is the young person aware of this referral? *	29. What are the presenting issues? *
30. sron a copy of our leaflet/website found 31.	N ○	
rson a copy of our leaflet/website found 31.	$\hat{\cdot}$ please state the reason why *	30. What impact is this having on the young person? *
32.	'. Is the parent/carer aware of this referral * Please ensure you have given the family/young person a copy of our leaflet/website to ensure consent is informed. Our website can be found here:: rise.childrenssociety.org.uk.	31. Please add any other relevant family history or information. *
32.	O Yes	
allows as to ensure the right support is round for the young being	* . please state the reason why *	32. How could this support benefit the young person? (This information allows us to ensure the right support is found for the young person)*



Identified Risk

33. Is the Young Person attending school? *

O Yes

None

38. If you have ticked yes to EHCP or SEND please provide more information here





To help understand what is on offer through RISE we have outlined our support options below. If you are unsure of how best to use RISE support within your school, the following tables aim to guide you by outlining some of the mental health interventions that we have successfully delivered in other Schools.

1-1 work

Effective for treating low mood and anxiety.

A description of treatments that may be included in this type of support can be found below:

- Graded exposure: used to help young people overcome a specific worry e.g. social anxiety, separation anxiety and other mild phobias. Goals are set by the young person to help them with their anxiety. Phobias of needles, blood, vomit are unable to be treat by EMHP's and require more specialist support.
- Behavioural activation: a treatment for low mood that involves planning, completing and reflecting on our own meaningful activities. In doing so we feel better, and our mood improves.
- Thought challenging: involves understanding and recognising negative thinking styles and challenging negative thoughts.
- Worry management: Includes exploring strategies of worry time, problem solving and using worry diaries.
- Parent CBT Parents complete 'Helping your child with Fears and Worries' with an EMHP to reduce anxiety in their child.
- Sleep: as part of treatment young people may be offered support for sleep hygiene.

Consultations

You can also request a consultation with an EMHP who can provide further support by:

- Discussing referrals.
- Discussing the suitability of individual children or young people for 1-1 work or group work
- For ideas to support specific pupils
- For ideas and help in embedding whole school support with mental health





Small group Interventions.

Small groups typically consist of up to 6 young people who would benefit from extra support and coping strategies around a particular issue. Please consider group dynamics and the impact a group setting will have on the young person before referring.

All group work is based in psychoeducation and raising awareness of issues affecting wellbeing. The work is targeted but generic and an individual's problems or issues will not be discussed or worked with specifically to keep confidentially and anonymity within the group amongst peers.

Please see the table below for small group intervention options.

Issue	Typical length of intervention	Session content	Age range	*Points to be considered
Understanding Emotions	4 weeks 40 - 60 mins per session	Explores different main emotions and provides coping strategies for managing overwhelm and difficult emotions. Supports skills development for emotional literacy and expression.	KS1-2	This intervention should feed into longer-term intervention from the school e.g., Nurture group work. Follow up work with a member of staff will be required and recommended for lasting change.





Small group Intervention continued.

Anxiety/Wory	6 Weeks 40-60 mins per session	Understanding anxiety and how it feels in the body. Coping techniques, thinking styles, challenging thoughts, problem solving	KS2 - yr3 onwards throughout Secondary	
Self-Esteem	6 Weeks 40-60 mins per session	Understanding what Self - esteem is. How we can recognise high and low self- esteem and its impact. Exploring strategies to boost self-esteem: Understanding links between thoughts, feelings and behaviours Thought challenging Recognising personal positives	KS2 - yr3 onwards throughout secondary	Please be aware of other factors that can contribute to low self- esteem e.g. familial issues. Please include these on referral form to allow us to signpost where needed.
Parent CBT	5 weeks with a 2 week break to practice a step-by step plan Each session 60 mins	Parent CBT in groups can be effective in helping a small number of parents at once, whilst supporting parents/ carers to feel less 'alone' in experiencing their child's anxiety presentation.		No more than 8 Parents or Carers in group.





Workshop Intervention

Whole class sessions can consist typically of 10-30 young people and aim to give young people an introduction and a greater understanding of the chosen topic as well as the opportunity to develop some strategies relating to the issue. Please note that there must always be a member of school staff present during whole class sessions.

To deliver target work in your school it is useful to identify needs amongst years groups and pick whole class workshops accordingly. For example, year 5 might be an anxious year and the focus of workshop delivery can be targeted to that year.

Topic	Typical length of intervention	Number of sessions	Age range	*Points to be considered
Mental Health Awareness	40 - 60 mins	1	KS1, KS2 and KS3	
Understanding Emotions yr 3 - 6	40 - 60 mins per session	4	Yr 1 - KS2	
Emotional regulation (Animals of regulation/ Brain Buddies programmes)	40 - 60 mins per session	5	yr 4, yr5, yr6	
Resilience	40 - 60 mins per session	1	All years	
Self-esteem	40 - 60 mins per session	1	All years	





Workshop Intervention continued ...

Topic	Typical length of intervention	Number of sessions	Age range	*Points to be considered
Anxiety/ worries	40 - 60 mins	1 - 4 Typically 2 sessions	All years	
Sleep Hygiene	40 - 60 mins per session	1	All years	
Exam Stress	40 - 60 mins per session	1	Yr 6 onwards	
Transitions to Secondary school or within Primary school	40 - 60 mins per session	1	Yr 6 or any primary age.	
Challenging Thoughts	40 - 60 mins per session	1	KS2 onwards	
Problem Solving	40 - 60 mins per session	1	Yr 2 onwards	





Delivery Options - a 'menu' of support. Assemblies

We can offer short assemblies to year groups, key stages, or whole schools with in-person or pre-recorded options.

Topic	Typical length	Age range
Introduction to RISE team	10-15 mins	All years ~ KS 1 & KS 2 available
Mental Health awareness	10-20 mins	All years ~ KS 1 & KS 2 available
Resilience Being Brave (resilience for younger years)	10 - 20 mins	KS 2 KS 1
Sleep	10-20 mins	All ages ~ KS1 & KS2 available
Exam stress & top tips	20- 30 mins	KS3 onwards
The Teenage Brain	20 - 30 mins	KS3 onwards





Parent Workshops

One off sessions for Parents/Carers to offer information and resources to support their child.

Topic	Typical length
Mental health awareness	50 mins
Anxiety/Worry	50 mins
Low Mood BA - Secondary General Low mood - Primary	50 mins
Sleep hygiene	50 mins
Helping your child with fears and worries	5 sessions Referrals required for each child/young person whose parent/carer will take part.
Understanding the Teenage Brain	50 mins







Staff training/consultations

In person or pre-recorded options

Topic	Typical length
Mental health awareness	40-50 mins
Anger	40-50 mins
Anxiety	40-50 mins
Emotional Regulation (zones)	40-50 mins
Understanding Emotions	40-50 mins
Classroom strategies for Worry: Worry monsters.	40-50 mins
Sleep Hygiene	40-50 mins
Self-esteem	40-50 mins
Resilience	40-50 mins
Friendships	40-50 mins
Low Mood	40-50 mins
Staff Wellbeing: burn out and rest	40-50 mins
Understanding the Teenage Brain	40-50 mins
Safeguarding - board game	40-50 mins



An example of a RISE delivery timetable

The EMHPs assigned to your school will contact you to arrange a meeting to discuss what support is required and to begin steps to plan to put this in place.

A delivery timetable will be created with your EMHP which will outline the agreed support during the 8 - 10 weeks that RISE will work within your school. Below is an example of what this may look like.

Your EMHP will be able to advise how best to structure the delivery. For example, it is important to allow enough time between sessions/ within the school day for EMHPs to follow up safeguarding concerns or to allow other opportunities for information sharing with necessary people.

EMHP names:

School Name:

Delivery Day: Wednesdays

Day/Data	Consist 1	Cassian 2	Cassian 2	Consists 4 (12:20 14:20)
Day/Date	Session 1	Session 2	Session 3	Session 4 (13:20 – 14:20)
Wednesday	(9:00-10:00)	(10:10 – 11:10)	(11:30 – 12:30)	(EMHP name)
D-4	(EMHP name)	(EMHP name)	(EMHP name)	
Date commencing:				
Week 1	Assembly – who are	1:1 Young	Class workshop	Staff training - anxiety
Date TBC	RISE/ mental health	Person	5Y – emotional	
	awareness		regulation	
Week 2	Assembly –	1:1 Young	Class workshop	Staff training - Self esteem
	Resilience	Person	5Y – emotional	
			regulation	
Week 3	Small Group A –	1:1 Young	Class workshop	Small Group B - Self esteem
	Anxiety	Person	5Y – emotional	
			regulation	
Week 4	Small Group A –	1:1 Young	Class workshop	Small Group B - Self esteem
	Anxiety	Person	5Y – emotional	
			regulation	
Week 5	Small Group A –	1:1 Young	Class workshop	Small Group B – Self esteem
	Anxiety	Person	6B – Anxiety	
Week 6	Small Group A –	1:1 Young	Class workshop	Small Group B – Self esteem
	Anxiety	Person	6B –Anxiety	
Week 7	Small Group A –	1:1 Young	Class workshop	Small Group B – Self esteem
	Anxiety	Person	6A– Anxiety	
Week 8	Small Group A –	1:1 Young	Class workshop	Small Group B – Self esteem
	Anxiety	Person	6A– Anxiety	
(Week 9 & 10)	2 catch up weeks availa	ble to be used by I	EMHP as required to	complete support where disruption
	has occurred, e.g., due to 1:1 pupil absence, school/bubble closure, EMHP illness.			







Q: Do RISE offer counselling? Are EMHPs kind of like Counsellors?

A. RISE does not offer a counselling service. EMHPs are not trained counsellors but are trained to deliver brief low level mental health interventions that use principles of CBT over 6 - 8 weeks. Counselling is a higher-level intervention, that usually lasts longer than this and has an emphasis on unpacking the reasons for a behaviour or belief. Low intensity CBT offers practical advice and support but does not look at the reasons for the beliefs or how a person developed an issue. EMHP sessions are more task focused and goal orientated. There are many North East services that can offer counselling services to young people, which your EMHP can signpost to if you feel this would be beneficial for a young person in mind.

Q: Why do RISE only support 4 sessions in a day?

A. EMHPs need gaps within the school day and between sessions to be able to complete follow up support for the young people they work with. Follow up support consists of sharing information with key individuals involved in the young person's life. As well as ensuring there is time to following any necessary safeguarding procedures whilst balancing practitioner wellbeing amongst running sessions throughout the day.

Q: Where should 1:1 and group work take place?

A. 1:1 and group work require a comfortable and confidential space, so that young people can feel relaxed and at ease enough to focus and participate within sessions. To ensure young people can get the most from sessions it is important to choose a space that will be calm at the scheduled session time and will be free from disruptions. This is incredibly important to the success of sessions for a young person.

Q: What should I consider when putting together a small group?

A. Small groups should consist of 3-6 young people. Consider each individuals mental health needs to ensure they can be met by the focus of the group. Consider how each individual will manage within a small group setting. Consider the group dynamics between members and whether each individual will benefit from attending.

Q: How long do RISE sessions last?

A. RISE 1:1 and group sessions last anywhere between 30 minutes to an hour and take place weekly over 6-8 weeks. Your assigned EMHP may adapt timings to meet the needs of the young people they are working with e.g. if working 1:1 with a Key Stage 1 child it may be more supportive to offer shorter sessions.







Q: What if we have a school trip? Someone is absent or our EMHP misses a week of the timetable?

A. Please be aware of planned school activities when creating the timetable with the EMHP . Your EMHP will try to accommodate any unforeseen disruptions that occur during the planned delivery by utilising the extra delivery weeks 9 & 10.

Q: What involvement do EMHPs have with Parents/ Carers once RISE are in school?

A. EMHPs may share handouts with children and young people as part of sessions that detail helpful information. Children and young people are encouraged to share strategies explored with parents/ Carers. EMHPs contact parents/carers of young people when they are referred and follow this up throughout involvement with RISE to share progress and information as required.

Q: How do I choose the right children for group work Vs 1:1 support?

A. The nature of 1:1 session allows the young person to focus more in-depth upon an area of difficulty and the individuals' circumstances whereas group work focuses mostly on developing our understanding of a shared difficulty and developing coping strategies. For some young people being a part of a group intervention can support them in developing confidence. Whereas some young people would not benefit from group work due to the nature of the difficulties they face and how this may impact on their ability to engage in group work where others are present.

Q: How best can I support EMHPs when they are in our school delivering support?

A. Our EMHPs love feeling a part of each school they deliver in. To help with this please let them know where they can find key members of staff; receptionist, safeguard leads, SENCo at different points of the day in case needed. If codes are needed to access areas of the school for EMHP can these be shared in advance. Please consider where the EMHPS can spend time during times of non-delivery and how practical this will be to them being able to provide follow up between sessions e.g., is there a confidential space available to take/ make calls and discuss safeguarding concerns if any arise. Please share any new information that you feel is pertinent about young people referred to RISE whilst sessions are ongoing.

Q: Will I find anything out about sessions being held?

A. EMHPs are happy to share information about what sessions may involve ahead of time. Feedback will be shared where appropriate to allow staff supporting individuals between sessions to be aware of progress, difficulties and things that may help. This will be done where young people give consent for EMHPs to do so or choose to do so for themselves.





Q: Why do RISE only offer support for a term?

A. RISE is a Mental Health Support Team that will work with any school or College within the Newcastle and Gateshead area. We believe in the importance of early intervention and in supporting schools by working alongside them to continue developing emotionally healthy educational settings. We recognise that so much is already being done within schools to promote young people's mental health. Our aim is to compliment what is already in place and work alongside schools to help develop some practices that each school then feels confident to keep utilising after RISE leave. In doing so we can reach a wider audience of young people to help support their ongoing mental health together.

Q: What will happen once the RISE support has been completed?

A. Once delivery has finished your EMHP will arrange a debrief meeting to feedback on group work/1:1 sessions, share resources and any further information that might be helpful for the continued support of young people. Such as training needs or work to be continued. Staff and young people involved with RISE support will be offered the opportunity to give feedback on the service received.

Q: How do we get more RISE support in school?

A. To work with RISE again please contact and request an Expression of interest form by emailing:

RISEreferral@childrenssociety.org.uk

Q: Can I refer a child who is already receiving mental health support with someone else?

A. RISE cannot work with any young person already actively receiving mental health support. This is because often different approaches may be conflicting and so cause overwhelm or confusion for the young person rather than support. RISE can work with young people who have historically received mental health intervention, if the RISE intervention is felt to be an appropriate intervention for their needs. Young people require at least 2 months break between different mental health interventions to allow time for each intervention to be most effective.

Q: Can I refer a child to RISE if that has also been referred to CYPS NHS?

A. RISE can work with young people who are awaiting CYPS assessment, however this should be discussed and considered on an individual basis with your EMHP to ensure that RISE support is appropriate and therefore can be beneficial for the young person.





Q: How long does it take to complete an online referral and what information do I need?

A: Please see the PDF RISE Referral Form enclosed to understand the information you will need to complete the form successfully. We would suggest collecting all required information alongside Parent/ Carers before attempting to complete the online the form, and to save this within a word document. This will allow you to copy over information to relevant sections on the online form more efficiently and will not time out.

Q: There's lots of choice in the referral guide menu of workshops, groups and 1-1s how do we decide what to choose?

A: We are glad we can offer lots that will be beneficial for your school. If stuck or unsure where to start we recommend having a consultation with your EMHP. Who can help you to identify the needs present within your school and make suggestions of what interventions would be most beneficial to implement during the time that RISE will be in school and support in creating a timetable that refelects this.

Q: Can RISE practitioners diagnose children and young people?

A: No, RISE is not a diagnostic service and EMHPS are unable to diagnose children and young people with Mental health issues or SEND. However, we can work with individuals in mainstream school and are currently working on developing our delivery to ensure this offer can be accessible to children and young people in non-mainstream settings also.



Appendix











The Children's Society

Safeguarding & Working with Schools Checklist

To ensure quality and best practice this checklist sets out clearly, the expectation of The Children's Society (TCS) when working within schools and colleges. This checklist needs to be conducted prior to any sessions being delivered within schools/ colleges by either DSL or Senior staff.

What you can expect from The Children' Society (TCS) and what TCS expect from our partnership

comply with legislative safeguarding duties, it is important that we clearly understand and agree the expectations and roles of both TCS to a TCS employee or volunteer during their work within the school or college are in the best interests of the child or young person, and children and young people we serve. To ensure that the processes followed in the occurrence of a safeguarding incident or disclosure Safeguarding incidents and/or disclosures occurring within educational setting involving TCS workers: When working within school and college settings, it is essential that TCS and educational staff work together to safeguard the welfare and wellbeing of the and school or college staff involved. TCS staff are expected to follow TCS Safeguarding Children, Young People and Adults at Risk Policy and Procedures at all times - this can be provided to the school and is available on TCS website. This means that we will

- Protecting children from maltreatment
- Preventing impairment of children's health or development
- Ensuring that children are growing up in circumstances consistent with the provision of safe and effective care
- Taking action to enable all children to have the best outcomes.

communication and agreements, it is expected that each educational setting will provide a named point of contact for TCS. This contact would preferably be the Designated Safeguarding Lead or a senior member of staff as the named contact will form the partnership with Named contact: to support the development and effectiveness of our work, and to avoid any miscommunication or delays or gaps in TCS related to responding to any safeguarding concerns or disclosures and will be the emergency contact for our workers.

Information sharing: Any information relating to safeguarding will be shared by TCS staff to the appointed contact for each school or college. It is expected that both TCS and the named contact will work together in partnership to safeguard the child or young person.

What you can expect from The Children' Society (TCS) and what TCS expect from our partnership

will share all information with the school/college regarding actions being taken. It is assumed that the school or college will follow their own Safeguarding Procedures and would also make referrals/info share with Children's Social care as required, again independent of take responsibility for undertaking this action, whether or not the school or college is making a referral/information sharing. TCS staff made, if a referral or information sharing to Children's Social Care is felt to be required under TCS Safeguarding Policy, TCS staff will action taken by TCS but similarly sharing action taken with TCS staff. In this way the two organisations are working transparently in Response to safeguarding: In all incidents where TCS staff are aware of a safeguarding concern or where a disclosure has been partnership, with both taking individual responsibility, to support and safeguard the child/ren concerned

group, we will endeavor to provide them with 1:1 sessions where safe and appropriate, in order that our services are delivered in a non-Risk assessments: Whilst we understand that schools and colleges are usually very safe places for children and young people and for our staff to work, in some cases, such as group work or very specialised workshops, we will conduct TCS risk assessments should we deem this appropriate for the safety of all involved. If deemed not safe, for example, for a specific child or young person to attend a discriminatory way.

schools are subject to an enhanced DBS check and any other vetting processes relevant to their specific role. TCS do not provide DBS DBS and vetting: TCS work within the Safer Recruitment framework and so all TCS employed staff and volunteers working within certificates to external professionals, and do not expect our staff to produce them in order to work within external settings but can provide confirmation that the checks have been completed and are satisfactory should this be required

their work mobile phones at all times. This is to ensure, that should a Safeguarding issue arise with a child or young person that they are The Children's Society equipment: Whilst working in schools, Educational Mental Health Practitioner (EMHPs) are to have access to directly with children and young people. Sometimes EMHPs will also need access to their Surface Pro computers within Schools, to escalation. The Children's Society staff adhere to policies and procedures in terms of the use of their mobile phones whilst working support them with delivery, when showing presentations and slides to children and young people and on occasion they will need to supporting through RISE delivery, that they are able to quickly and efficiently phone through to their line manager for support and update essential case notes, as such at times they will require access to the Schools/Guest WiFI

N.B.TCS is Cyber Essentials Plus certified, which is a very high achievement in security and shows TCS commitment to keeping our young people's data extremely secure.

Delivery Space for sessions: Practitioners require suitable space to carry out one to one and small group sessions with children and young people. These spaces should be as free as possible from distractions and interruptions. They need to also be a safe and confidential space, where children and young people feel at ease to open and up and talk through their feeling and emotions.

The <mark>Chil</mark>dren's Society



Information on GDPR

By law and because we also think it's right, we need to ask for your permission (consent) before we **collect, keep, and use some information about you** that we receive from you and other people. It is important that you make an informed decision about whether or not you allow us to do this.

RISE works in schools and colleges across Newcastle and Gateshead to support children and young people (aged 5-18) with their emotional well-being and mental health.

Our highly trained Education Mental Health Practitioners (EMHP) work with parents, teachers and education professionals to help children & young people feel more in control and more resilient in managing their well-being and mental health.

RISE offer a range of therapeutic approaches to encourage children and young people to feel able to manage how they are feeling and have the ability to talk through things that are on their mind.

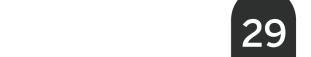
The General Data Protection Regulation (GDPR) makes sure that all personal information collected and used by your programme and The Children's Society is looked after in ways that:

- Allow you to easily understand how and why your personal information is used
- Clearly tells you about situations when The Children's Society may have to share your information
- Gives you rights about how your personal information is used:
 - It can be changed if it is not right
 - You can object if you think it should not be used in a certain way
- Keeps your personal information secure
- Gives you access to information that is about you and a copy of it.

Why do we keep your information, what is the reason for this?

- To help us support you, providing services and assistance in the best way we can.
- To keep you safe by having access to the important information about you.
- To be prepared in case of an emergency, such as if you become ill.
- To keep a record that you can refer to in the future.

- To make sure that The Children's Society has given you a good service and improve what we do for other young people. Your information will help us to understand how you have been assisted. Learning like this is important to us and will help us improve what we do.
- Our funders expect us to record information about how we work with people.
- To provide information that allows The Children's Society to campaign for change by looking at real life situations in the lives of young people. We do this by sometimes researching actual case files, so that we can show people what is happening in young people's lives and how things can be improved. This is only ever done in ways that do not identify anyone.
- To provide statistical information to the organisations and people who fund our work.
- To give numbers and facts about the service that help research, planning and campaigning.
- To help with any inspections, audits, enquiries or investigations by The Children Society, a local authority, organisations we work with, Local Safeguarding Boards, Ofsted or the Care Quality Commission. We only do this in ways that do not identify people.
- To share information about you as required by our funders and the organisations we partner with.



What kinds of information do we keep?

- Name and contact details of you, your family, carers and other people you tell us about
- (these could be friends and people who you know where you live or people who are helping you like a social worker, youth worker or teacher).
- Details about your health, well-being and any support needs or disabilities.
- Your ethnicity, religion or faith.
- Information about any contact with the police or courts or about criminal activity.
- Legal information.
- Feelings, thoughts and emotions about the things you talk about, things you want help with and positive things you are involved with.
- Your opinions and ideas about what should happen next and how you think we can support you. Things you write, draw or design about this.
- Letters, emails, texts or photographs that you send us or we send you.
- Notes of conversations or reports that we have about you or other people.
- Letters, emails, text/WhatsApp messages, digital recordings and reports that we send and receive from other people about you.
- Personal documents given to us about you.
- Information about you not being safe or that you are being hurt.

If you feel that you can't give us information that we will need to help us work with you and provide a service, we will tell you how it might affect the things we can do for you.

Where do we keep your information and for how long?

- It is kept in a secure computer based system called MOSAIC. All your information is kept secure on computers in the United Kingdom. Only the project workers or volunteers that work with you, their managers, the people who look after the Mosaic database and other agreed managers and researchers can see your records. We make sure this is done so as to maintain your confidentiality.
- Some information may be kept in other secure files in your programme's computer system.
- Sometimes other organisations we work with require us to record information about you on their recording system.

■ We will keep your record for a period time(described in a policy) so as to make sure we can provide you and The Children's Society with information, for our research purposes, the purposes described in this form and to allow us to help protect you and others. We will use and keep your information for as long as it is needed to do this. How long we keep it for is based on these purposes, together with our legal and regulatory requirements. If you want more information about how long your record is kept, please ask your project worker.

Will you share my personal information with anyone outside of The Children's Society?

This form includes a list of the people and organisations that we may need to share your personal information with. If there is anyone that you would prefer us not to share your personal information with, please discuss this with your project worker. They will be able to tell you how this may affect the service that we provide you with and make a note of your wishes on the form.

We may possibly ask you for additional consent in the future, for us to share information with a statutory service or another care provider or specialist organisation- i.e. to support your future care. This could include services like-

- Health & Social Care
- Education

- Specialist services

Are there any situations where you have to share information and contact other people against my wishes or without my permission?

We cannot guarantee complete confidentiality if:

- You or someone you know is being or has been abused or neglected.
- There are signs or indicators that you or someone you know is suffering or at risk of suffering significant harm.



- You need medical treatment or there is an emergency.
- We think a crime is likely to happen or has happened.
- To protect people who might be at risk because of extremist behavior or actions.

We will usually try to tell you in advance that we are going to share this information, but sometimes this is not possible.

Can I see what is being recorded about me?

Yes, you can. You have a right to see your file and the information kept about you by The Children's Society. Speak to the person who is working with you and they can arrange this for you.

You also have rights about how your personal information is used:

- To ask for information that is not correct to be changed.
- To object if you think your information should not be used in a certain way.
- To ask us to stop using your information in certain situations.
- To have your personal information erased from our records, but only if we no longer need to keep it for legal, public interest, legal claims or archiving in the public interest..

For more information about these, please ask your project worker.

Legal basis

We will create, look after and use your personal information in the ways we have described on this form.

To allow us to use your information that is 'sensitive' (for example about your health, faith, beliefs or ethnicity) we will obtain your consent by asking you to sign this form. We may also use this information without your consent:

When doing so is in the substantial public interest. This includes:

- Protecting you or somebody else from neglect or physical, mental or emotional harm or protecting the physical, mental or emotional wellbeing of you or somebody else; or
- Preventing or detecting a crime.
- To exercise any rights and meet any obligations that you or we have under social protection law.
- To establish or exercise our legal rights or defend legal claims against us.
- To protect the vital interests of you or somebody else (for example, if there is a medical emergency).
- To permanently keep your case records in an archive if it is in the public interest to do so.

To allow us to use other types of your personal information we will obtain your consent by asking you to sign this form. We may also use this information without your consent:

- To comply with legal obligations to process your personal data for a particular purpose.
- For The Children's Society's own legitimate interests, but only where this does not harm your rights.

Some of these reasons will overlap and there may be several that justify our use of your personal information.

If you have a problem, or are unhappy with our service, you have a choice of doing any of the following:

- 1. Talk to your project worker/volunteer or ask to speak to their manager.
- 2. Complete the confidential complaints form on childrenssociety.org.uk/sayit
- 3. Email complaints@childrenssociety.org.uk
- **4.** Phone or text: **0300 303 7000** (8am-4pm, Mon-Fri)
- **5.** Phone **0800 783 7173*** (8am–4pm, Mon–Fri)
- **6.** For a complaint about your record, you can also contact The Children's Society Data Protection Officer by email **data-protection@childrenssociety.org.uk**, or
- 7. The Information Commissioner using their Helpline: **0303 123 1113** or by email **ico.org.uk/global/contact-us/email/**





PDF Information Sharing and Consent form

RISE can accept hard copies of this completed form where this may be easier for schools to gather this information.

Alternatively, it should be completed online at:

https://bit.ly/RiseConsentForm

RISE will require parent/carer consent for children and young people in all cases, unless gaining parent/carer consent is not appropriate and the child or young person is deemed Gillick competent and able to consent for themselves.







Give us Consent to work with you and store your data

The information you give us will be shared with the relevant Children's Society Mental & Emotional Health Services to help us provide you with relevant services and assistance

Childnen's Society Mental & Emotional Health service you are also consenting to our partnerships, if necessary and The services that we deliver are confidential; this means we do not share the information you have told us without there being a real need to do so, or without your prior consent. When you give consent to receive help from a The appropriate. For example: If we are worried about your mental or emotional health or if you are already receiving/ waiting to receive care from other partners, then we may speak to them to clarify how best to help you. The only time we would share information which includes your full name, address and other clinical and demographic information, would be in order to refer you to appropriate agencies to meet your needs, where we would firstly seek

consent to do so.

without your consent, to help keep you or other people safe. We would still discuss this with you, before sharing the Or in some circumstances, if we were worried about your safety or someone else's safety, we may share information information.

Sometimes we may complete a capacity assessment, which helps us assess whether you are currently able to make decisions in your best interests

This includes to commissioners. When we share information for means of monitoring and reporting, the information All our services are required to provide specific information for monitoring, research and service planning purposes. we share is limited to your initials, date of birth and sometimes gender

š

0

We make all of our notes on an electronic system called Mosaic and this is only accessible by workers and senior staff within The Children's Society. We store your information in accordance with General Data Protection Regulations GDPR

will only be shared with the people involved in making a decision about helping and providing relevant services. If the By providing your information you agree to it being used in this way. The registration form is secure and information form contains information that suggests you or an individual may be at risk of harm, then the information will be shared with others to provide necessary support.

For further information contact The Children's Society's Data Protection Officer. dataprotection@childrenssociety.org.uk

The Children's Society (Trading) Limited, a private limited company with registration number 885496 and data The Children's Society, Whitecross Studios 50 Banner Street London EC1Y 8ST Charity Registration No. 221124 & data controller number. Z7088095.

controller number Z8912805.

Are you completing this consent form as: *

) Parent/carer	Young person	
0	0	

Consent statements to confirm- Parent/Carer

Children	
He	
ķ	
involved	
getting	
T am	
ervice o	
e se	
ē	
referred	
have been	
person	
child/young p	
i pe	
ol nc	
reas	
Ĕ	

ipa
×
-
-2
-8
2
-
ع
ā
_
-
\simeq
-
To
6
ð
70
æ
-
_
-
Ħ
÷
_
•
Ε
Œ
8
- 99

- ş Society.
- Why The Children's Society needs to keep information about me or the child/young person
 - What kind of information is kept.
- Who The Children's Society will share my or the child/young person information with.
- Who I or the child/young person can contact if I or the child/young person am unhappy with anything about The Children's Society.
 - The situations in which The Children's Society will need to share information without my or the child/young person permission.
- What my or the child/young person rights are about my information
- 2. Do you understand that to work with your child or young person we have to store data about them? *

	consent
	withdraw
	2
	right
	the
	has
	person
	Do you understand that your child/young person has the right to withdraw conse
	JOO.
	lat.)
	=
	nderstan
9	5
	8
0	2
	m

- at any point? *
- 4. Someone from The Children's Society may contact your child/young person after the O š <u>8</u>
- work has ended to ask for feedback and talk about their experiences and opinions, is this okay? *
- <u>2</u> Š 0

Ų	0
40	בום
ç	2
ò	Š
Dog	U

*
name
3
Your
7

5. I have read and understood and I give my consent to my child/young person to receive

a service from The Children's Society RISE service

If you select "I don't agree", we are not able to progress any work with your

child/young person... *

O I don't agree

O lagree

8. First name of young person *

9. Last name of young person *

6. I have read the statements above to my child/young person and they give their

consent to receive a service from The Children's Society RISE service

If you select "I don't agree", we are not able to progress any work with you... *

O I don't agree

O lagree

Date of Birth *

Please input date (dd/MM/yyyy)

11. School *

Date completed *

Please input date (dd/MM/yyyy)



Consent statements to confirm- CYP

I confirm that I understand the following:

- The reason I have been referred to the service or am getting involved with The Children's Society.
 - Why The Children's Society needs to keep information about me.

 - What kind of information is kept.
- Who The Children's Society will share my information with.
- Who I can contact if I am unhappy with anything about The Children's Society.
- The situations in which The Children's Society will need to share information without my permission. What my rights are about my information.
- Do you understand that to work with you we have to store data about you?

What is your last name? *

- O Š
- <u>₽</u>
- 14. Do you understand that you have the right to withdraw consent at any point? *
- ě
- <u>8</u> ○
- 15. Someone from The Children's Society may contact you after the work has ended to ask for your feedback and talk about your experiences and opinions, is this okay?*
- O Se
- <u>₽</u>
- 16. I have read and understood and I give my consent to receive a service from The Children's Society RISE service
- If you select "I don't agree", we are not able to progress any work with you... *
- O lagree
- O I don't agree

Person Details

Please complete the form with your details.

17. What is your first name?

19. Date of birth *	Please input date (dd/MM/yyyy)

1

20. School *



21. Date completed *

Please input date (dd/MM/yyyy)







The Initial Assessment Process

Within the first session of any 1:1 work the EMHP needs to gather information about the young person who has been referred and the difficulties they are facing. This is known as the Initial Assessment process, and it allows the EMHP to understand what is going on for the young person and to ensure that they receive the best support available that will be most appropriate to their needs.

The Initial assessment process explores aspects of the young person's life collaboratively with the young person. Consent and confidentiality are discussed with the young person so that they are aware of their right to decide to partake in sessions or not. As well as to understand when we may have to share information for their safety and who this could be with. It also aims to promote safety for the young person by assessing risks to the young person and others involved with the young person. To fully ensure that the young person is appropriately safeguarded we must ask questions around their thoughts, feelings and behaviours including assessing whether they have previously had or currently experience suicidal thoughts as well as engaged in any self - harm behaviours. The risk assessment process is adapted to be appropriate and accessible for the age and needs of each child/young person working with an EMHP.

This process is essential to improving mental health outcomes for the young person. Where EMHPs become aware of any risks to the young person's safety, we share this information with the relevant professionals to ensure the young person is adequately safeguarded and so that the young person has access to the right support to reduce risk.

Sometimes the Initial Assessment process can identify that the young person requires a different kind of support to what RISE offer, this may be because they would benefit from a specific type of support that EMHPs are not trained in such as:

- Bereavement support
- Domestic abuse
- · Parental mental health impacting upon child
- Neurodivergence & sensory needs
- Behavioural issues
- Resilience & Self-esteem
- Nurture work

Although not an exhaustive list, in the examples above it be unethical and would be of more benefit to the young person to access a longer type of support such as Counselling or a specific statutory organisation.

Where this is the case EMHPs will discuss this with the young person and their parents and support signposting the young person to access the most appropriate support for their needs.