



# Clifton High School

co-educational nursery pre-school to sixth form

<b>Policy applies from EYFS to Sixth Form</b>	<b>Counselling</b>
Date policy updated	12.11.2020
Date policy to be reviewed	12.10.2021
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A shaded area denotes a regulation to which all schools must comply	

*Clifton High School is committed to child protection and safeguarding children and young people and expects all staff, visitors and volunteers to share this commitment.*

## **Related Policies**

Child Protection and Safeguarding  
Data Protection, Retention and Management  
Mental Health

## **Counselling Aims**

Clifton High School offers a counselling service for any pupil from the school. Counselling at the school is available on a short term basis for discussion of the following types of matters: Bereavement, loss, change, relationship issues, family problems, health – physical or mental, identity, stress, anxiety, depression, suicidal thoughts, self-esteem, self-harm, managing expectations (self and others'), bullying, abuse, anger management, transition, some drug and alcohol problems, eating disorders, health, identity (religious, cultural or sexual), friendships, feelings of isolation or loneliness and bullying.

For serious and long term matters; pupils can be sign-posted by the counsellor to specialist help from external agencies and support groups.

## **Referrals**

Referrals for counselling can be made via a School Nurse or a member of staff. Parents of Year 1 – 6 pupils can also make referrals via the pupil's class teacher. Alternatively pupils can self-refer themselves. Self-referrals can be made directly with the counsellor, on a letter or note left in the box outside the counselling room, or email or via a text message to the school counselling phone. The counsellors' contact details are found on posters around the School.

The referral form is attached in Appendix 1.

## **The Counsellor and Accommodation**

The Counsellor who works at the School has experience of counselling children, young people and adults and is offered on three days per week in the Counselling Room which is situated in the basement of Woods Building. The room offers comfortable seating, and for younger pupils, a sand tray and art materials. All appointments and communication with the counsellor occurs within their contracted hours.

### **Counselling Appointments**

The initial appointment is an assessment. This is an opportunity for the counsellor to determine whether a pupil would benefit from counselling and in case the pupil needs external support. Counselling in school is usually for six sessions which take place weekly for 40 – 50 minutes per session. Appointments are always arranged to minimise disruption to teaching and learning, and, in particular, examination year groups are given priority over lunchtime and study period slots. There are times during their day when the counsellor may not be busy when pupils can turn up without an appointment and there is also a weekly drop-in session for senior pupils during the lunch period. Details of the drop-in sessions are published in classrooms and noticeboards around the School.

### **Counselling Consent**

Senior pupils are able to meet with the counsellor for a series of sessions following their assessment appointment without the consent from their parent. Pupils can therefore give their own consent by completing Appendix 3.

Pupils in Year 1 – 6 need to have consent from both parents, where applicable, following the assessment appointment if they are to continue with counselling. Parental consent will require the completion of Appendix 2.

### **Communication with Parents**

The counselling service is only available for pupils. There are times, however, when it is necessary or beneficial for a counsellor to hold a one-off meeting with a parent to discuss their child's needs. In these circumstances, permission must be sought by the counsellor from the Deputy Head of School, prior to the meeting and a Form Tutor, Infant/Junior Leader or Head of Year must be present at the meeting.

### **Confidentiality and Safeguarding**

All of the discussions with the school counsellor are confidential except for when the pupil raises a matter which suggests that harm has been, or may be, caused to that pupil or any other person. In these circumstances, the counsellor will always speak to the pupil first to advise them that someone else will need to be informed. All Child Protection and Safeguarding matters need to be forwarded to the Designated Safeguarding Lead and Deputy Head, Pastoral or one of the Designated Safeguarding Lead Supports.

### **COVID-19 Adjustments**

***All COVID-19 processes and procedures are always adhered to, as per the Risk Assessment, to ensure the School continues to be COVID-19 safe.***



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## Appendix 1

### Referral for Counselling at Clifton High School

Please complete Part 1 of the form to refer a pupil for counselling.

#### Part 1 – Referral for Counselling

Name of pupil:	
Date of birth:	
Year and Class:	
Class Teacher or Form Tutor:	
Home address of priority 1 Parent:	
GP name and surgery (if known):	
Name of person making the referral:	
Contact details of referrer:	
What are the referrer's concerns:	
Date of referral:	

#### Part 2 – Counselling Report

Counsellor's name:	
Number of sessions taken:	
Child Protection or Safeguarding issues:	
Outcome:	



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## Appendix 2

### Consent Slip for Counselling of Year 1 - 6 Pupils

I \_\_\_\_\_ give permission for my child \_\_\_\_\_  
whose date of birth is \_\_\_\_\_ to work with the school counsellor in a series of counselling  
sessions.

I understand that this counselling will be confidential unless there is a Child Protection or  
Safeguarding concern.

Signature of Parent 1: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent 2: \_\_\_\_\_ Date: \_\_\_\_\_

Year 1 - 6 pupils need to have consent from both parents, where applicable. If parents live separately  
then each parent can sign a separate form.

Please sign and return the consent slip to the School Counsellor, via the School Office.



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## Appendix 3

### Consent Slip for Counselling of Year 7 – 13 Pupils

I \_\_\_\_\_ date of birth \_\_\_\_\_ agree to work with the school  
counsellor in a series of counselling sessions.

I understand that this counselling will be confidential unless there is a Child Protection or  
Safeguarding concern.

Signature of Pupil: \_\_\_\_\_ Date: \_\_\_\_\_

Please sign and return the consent slip, to the School Counsellor via the box outside the counselling  
room.