Pastoral Cause for Concern Form 2021\_2022

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| Child Name: Age: Date of Birth:  |
| Class: Teacher: Parents: Form Completed on/by: |
| Any existing SEND: Yes/No *(Give Details of Area of Need)* |
| PP: □ Safeguarding: □  |
| **Main Areas of Concern:*** Self Esteem □ ● Anxiety □ ● Emotions □ ● Family Situation □ ● Resilience □
* Anger Management □ ● Behaviour □ ● Bereavement □ ● Friendships/Social □
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| **Briefly describe the difficulties that the pupil is experiencing:** |
| **Briefly explain what measures have been put in place at Class level to support the pupil (conversations, resources, PSHCE):**Calm Down techniques □ Network hand □ Anger triggers □ Feelings thermometer/5 point scale □Social Story □ Mindfulness □ Breathing techniques □ Book of Brilliance □Other (please detail below) □  |
| **Parent Observations/Notes:** |
| **Teacher/LSA Observations/Notes:****Agreed actions to be taken by the Pastoral Support Team/Details of support provided:****Dates:**

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| **Concern First Raised** | **Handover to Pastoral Team (after 1 month)** | **Discharge/ Professional Referral** |
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**Referred to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(School Nurse/GP, Early Help, Chums, EP, CDC/SEND/ Other (please specify)** |