



### **Youth Mentoring for Referral Checklist (10 - 18 yrs)**

Please work through this checklist before contacting us about a referral. If still relevant, contact our Youth Mentoring Coordinator to discuss our capacity to support before referring – contact details below.

Please do not submit a referral before this conversation:

|  |  |   |   |
|--|--|---|---|
| <b>Eligibility:</b><br><br>You must be able to tick all of the boxes |  | 1 | They are aged between 10 – 18 years or up to 25 for those with learning difficulties  |
|  |  | 2 | They are able to build relationships based mainly on conversation   |
|  |  | 3 | You have explained to them how our mentoring project works, what is expected of them, and you believe they have understood this |

|  |  |   |  |
|--|--|---|--|
| <b>Referral Criteria:</b><br><br>Applicants must meet two or more risk factors. Tick each relevant box |  | 1 | Displaying signs of anti-social behaviour  |
|  |  | 2 | Disengaged, excluded or at risk of exclusion from education or wider group setting   |
|  |  | 3 | Not in employment or training  |
|  |  | 4 | In or leaving care   |
|  |  | 5 | Experiencing significant challenges outside of school - including factors; such as a lack of role models, family breakdown, bereavement, isolation, historic domestic abuse. |

|   |                          |   |   |
|---|--------------------------|---|---|
| <b>Service Limitations:</b><br><br>If you tick one of these boxes your client may not be suitable | <input type="checkbox"/> | 1 | Their behaviour could present a risk to the practitioners engaging with them                        |
|   | <input type="checkbox"/> | 2 | They have significant challenges requiring support that is not already in place                     |
|   | <input type="checkbox"/> | 3 | They have considerable learning support needs   |
|   | <input type="checkbox"/> | 4 | They have significant mental health challenges e.g. suicidal thoughts, self-harm                    |
|   | <input type="checkbox"/> | 5 | Their parents/carers or environment could present a direct risk to practitioners engaging with them |

**NEXT STEPS:** If your referral meets these criteria, please contact us to discuss our capacity to support.

Contact details: 07747 401 083

One of our practitioners will get back to you as soon as possible.