Redbridge Mentoring Programme – Structure

Through a regular programme of one-to-one support, we can begin to identify and address a whole range of issues that can cause some students difficulties in reaching their potential. This can include, but is not restricted to, matters of identity, self-esteem and resilience, social anxiety, relationships and behaviour. We can also mentor young people around issues of personal safety, including sexual health, drugs and alcohol awareness and social media safety. As mentors, we ensure that we signpost, or where necessary, make referrals to specialised services and agencies

We are flexible in our approach to the young person, using a range of methods to enable them to get the most benefit from their sessions.

We offer a seamless programme of interventions that move through phases. There is no prescriptive number of sessions for each phase; this will depend on the needs and level of engagement of the young person and their willingness to recognise their difficulties and make changes in their own lives.

- Phase 1 Introduction and 'assessment' this phase focuses on getting to know the young person and building the relationship necessary to establish an open and honest dialogue. We do not offer clinical assessments but help the young person to decide whether any onward referrals to specialist services might be necessary eg CAMHS or Fusion.
- Phase 2 Addressing the issues this phase will be the longest and will endeavour to help the young person to understand and acknowledge why they have been referred and how they can overcome their difficulties using suggested techniques and strategies. We will also help them to recognise the impact their behaviour has on others. Through negotiation with the young person, parents and school, any necessary specialist referrals will be suggested, working alongside our intervention with the young person.
- Phase 3 Positive activities this phase can be carried out in conjunction with phase 2, once the other issues have been addressed. We encourage the young person to engage in diversionary activities designed to have a positive effect on their mental and/or physical health as well as worthwhile use of their spare time. If possible, the mentor will help research appropriate activities and accompany the young person initially.
- Phase 4 Exit and moving on ideally the process of closing the referral should be planned and
 phased to avoid the young person from feeling 'dropped'. This could involve a gradual reduction;
 shortening of sessions or meeting on alternate weeks for example, followed by occasional phone
 contact.
- **Six-week Review** Regardless of what phase has been reached, after around six meetings the worker, with the help of the referring professional, will complete a review form. This is to establish whether the young person is engaging in the process and if the mentoring is helping and worth continuing. It will only work if they want it to.

There is an expectation that the referring agency contributes to the review. Without this input it is impossible to ascertain any progress. This can be done verbally with the mentor and added to the form at a later date.

- Periodical review It is possible for the process to 'stagnate'. This could be for a number of
 reasons eg the mentoring has been going on for so long that the meetings simply become
 routine or the young person and/or their parent form a dependency on the mentor and do not
 accept responsibility for their own development.
- Reciprocal updates Updates will be sent to the referrer after every two or three sessions.
 However, it must be noted that without regular updates from the referrers perspective we only have the young person's view which, by definition, is likely to be one-sided. Relevant information relating to any current incidents would also be appreciated to help inform our intervention going forward.