



Republic of the Philippines
Department of Education
REGION IV-A CALABARZON



17 February 2025

Regional Memorandum
No.134 s. 2025

**GUIDELINES ON THE LOCALIZED REFERRAL SYSTEM FOR
MENTAL HEALTH PSYCHOSOCIAL SUPPORT (MHPSS)
INTERVENTIONS AND ADOLESCENT
REPRODUCTIVE HEALTH**

To **Schools Division Superintendents**

1. Relative to the ESSD-URM-2024-135¹ and ESSD-RM-2024-649², this Office, through the Education Support Services Division-School Health Section issues the enclosed Guidelines on the Localized Referral System for Mental Health Psychosocial Support (MHPSS) Interventions and Adolescent Reproductive Health which aims to give a standard Region-Wide referral system addressing the learners' mental health and adolescent reproductive health concerns.
2. This Memorandum shall be implemented in all public elementary and secondary schools in the region starting School Year 2025-2026.
3. For any concerns or clarifications, please contact Pearl Oliveth S. Intia, MD Medical Officer IV at pearl.intia@deped.gov.ph.
4. For immediate dissemination and compliance.


ATTY. ALBERTO T. ESCOBARTE, CESO II
Regional Director *amy*

03/ROE5/JDC

¹ Pre-Consultation Workshop for the Localized Referral System on Mental Health Psychosocial Support (MHPSS) Interventions and Adolescent Reproductive Health

² Finalization Workshop for the Localized Referral System on Mental Health Psychosocial Support (MHPSS) Interventions and Adolescent Reproductive Health



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Guidelines on Localized Referral System for the Mental Health Psychosocial Support (MHPSS) Interventions and Adolescent Reproductive Health

I. Rationale

The establishment of a school-based mental health referral system is grounded in several critical legal frameworks and policies that prioritize the well-being and protection of students. Republic Act No. 11036, also known as the Mental Health Act, specifically mandates educational institutions to develop programs that raise awareness about mental health, identify individuals at risk, and establish referral mechanisms for students with mental health conditions to access appropriate treatment and psychosocial support. Complementing this, Republic Act No. 10533, or the Enhanced Basic Education Act of 2013, emphasizes the importance of holistic education, which includes addressing the mental health needs of students. This requirement aligns with DepEd Order No. 55, Series of 2013, which calls for schools to create systems to respond to learners in distress, ensuring that they are referred to the appropriate mental health services.

Further, DepEd Order No. 42, Series of 2016, outlines guidelines for implementing mental health programs in schools, underscoring the necessity of referral systems to ensure timely and adequate care. Laws such as Republic Act No. 7610, which provides special protection for children, and Republic Act No. 7160, the Local Government Code, both support the need for an integrated approach between schools and local health services to protect and care for students facing mental health challenges. Lastly, the Philippines' commitment to the UN Convention on the Rights of the Child reinforces the obligation to ensure children's right to mental health care, both within the school environment and through community-based resources. Together, these legal mandates form a compelling case for the creation of an efficient and responsive referral system that ensures students have timely access to necessary mental health support and services.

The Department of Education (DepEd), in collaboration with relevant government agencies and stakeholders, shall offer guidance in the creation and execution of mental health referral systems and programs for educational institutions. These efforts aim to:

- a) promote mental well-being;
- b) provide essential support services for individuals at risk or those already experiencing mental health conditions; and
- c) establish effective connections with other agencies and organizations to ensure access to support, treatment, and ongoing care.

In view of the above, this guideline aims to establish a Localized Referral System for Mental Health and Psychosocial Support Systems (MHPSS) that will guide DepEd schools in addressing learners who need counseling and should be referred to other mental health professionals/services.

II. Scope

These guidelines on the referral system for Mental Health and Psychosocial Support (MHPSS) Intervention and Adolescent Reproductive Health (ARH) shall be applicable to all public Elementary and Secondary Schools of Region IV-A CALABARZON.

III. Definition of Terms

Adolescent Reproductive Health - refers to physical and emotional wellbeing of adolescents and includes their ability to remain free from unwanted pregnancy, unsafe abortion, STIs (including HIV/AIDS) and all forms of sexual violence and coercion.

Authorized Guardian - a responsible adult to make decisions for and manage the affairs of a minor or an incapacitated person

Back referral/ return slip - slip form detailing the learner's observation, findings and remarks after being referred to a certain agency or medical facility.

Counseling – is the well-planned, goal-oriented and short-term intervention that aims to help learners manage and overcome issues or concerns that hinder them to attain success. Its process aids learners to define the problems, their resources, options and pros and cons, which facilitate them to decide and act appropriately.

External referral - refers to a process where the school identifies a learner's need for support or services outside the school's resources, expertise and connects the learner with external agencies or organizations or professionals.

Follow-up – refers to an act of monitoring, evaluating and responding to the process and status of referred learners that entails implementation of intervention program and to track learner's progress.

Guidance designates - refers to teachers who are officially designated by the School. Head/Schools Division Superintendent/Regional Director to perform duties related to the implementation of guidance services excluding counseling.

Internal referral – refers to the process within the school where concern/issue related to the learner's academic behavioral, emotional and social wellbeing is identified and addressed through a collaborative approach involving staff, counselors/designates, administrators and school head.

Learner - refers to a pupil or students in the formal system, or to a learner into an alternative learning system

Mental health condition – is defined in the RA 11036 as a “neurologic or psychiatric condition characterized by the existence of a recognizable clinically-significant disturbance in an individual's condition, emotional regulation, or behavior that reflects a generic or acquired dysfunction in the

neurobiological, psychosocial or developmental processes underlying mental functioning.

Mental health- is a state of well-being in which an individual realizes one's own abilities and potential, copes adequately with the normal stresses of life, displays resilience in the face of extreme life events, works productively and fruitfully, and can make positive contributions to the community.

Mental Health Professionals – refers to those persons with formal education and training in mental health and behavioral sciences such as, but not limited to, psychiatrist, psychologist, psychiatric nurse and psychiatric social workers.

Mental Health Gap Action Programme (mhGap) - is a programme developed by World Health Organization (WHO), which aims to increase mental health service coverage and to reduce the gap between needs and supply.

Monitoring – refers to the ongoing process of tracking and reviewing the learner's progress, status and response to the referred services or interventions to ensure and evaluate the appropriateness of support received and the effectiveness of referrals.

Partners – refers to the agencies or institutions within the community that can handle the school's referral. (DSWD, DOH, other gov't agencies)

Peer Navigator/Educator - a trained learner that is capable of knowledge and understanding the needs of a learners and the flow of the referral system and its possible linkages

Referral – is one of the guidance services where learners are facilitated to avail other assistance or services that address their mental health or other concerns. This requires a wide range of internal partners (i.e. counselors, teachers, nurses and school administrators), external partners (I.e. government, non-government agencies, organizations), and individuals in different professions, fields and interests.

Registered Guidance Counselor (RGC)- refers to a person who implements prevention and wellness programs including suicide prevention and promotion of positive mental health. A person who has been registered and issued a valid Certificate of Registration and a valid Professional Identification Card by the Professional Regulatory Board of Guidance and Counseling and the Professional Regulatory Commission (PRC)

IV. Policy Statement

DepEd - CALABARZON issues these guidelines to ensure proper implementation of the Localized Referral System for Mental Health and Psychosocial Support (MHPSS) and Adolescent Reproductive Health (ARH) starting School Year 2025-2026. This policy aims to:

- a. Identify the key players, resources, coordinators and specialists for the internal and external referral system;
- b. Establish the systematic procedure of referral of learners in public schools;

- c. Guide all public schools and all governance levels in the implementation of referral of learners; and
- d. Support processes that contribute to the attainment of the Department's mental health program.

V. Guidelines

The Department of Education – Region 4A CALABARZON, with its strong commitment to address the mental health concerns of learners, issues, and the following specific procedures of Localized Referral System on Mental Health Psychosocial Support Intervention and Adolescent Reproductive Health.

The Referral System

Process Flow of the Counselling and Mental Health Psychosocial Support Referral System

This process flow outlines the steps and structure involved in addressing the mental health and psychosocial support needs of individuals in a school setting. The system integrates **internal** and **external** interventions to ensure proper care and support, from identification to aftercare. See attached Annex A.

1. Initiation of the Referral Process

- The process starts when a teacher, learner, school personnel, parent, or any other significant person identifies a concern or observes the results of assessment tools (e.g., CARS or HEADSS).
- This concern is directed to the Guidance Counselor in schools with a Registered Guidance Counselor (RGC) or a guidance designate (in schools without an RGC).

2. Referral to Guidance Counselor

- The Guidance Counselor or designate:
 - Conducts intake interviews to understand the issue better.
 - Notifies the school head for awareness and administrative guidance.

3. Assessment and Risk Stratification

- Based on the intake interview and initial observations, the counselor assesses the level of risk and identifies the severity of the mental health concern.
- Risk Levels:
 - No Risk / Low Risk: Requires Tier 1 interventions.
 - Moderate Risk: Requires Tier 2 interventions.
 - High Risk / Emergency: Requires Tier 3 interventions.

4. Treatment Pathways Based on Risk Levels

Tier 1: General Interventions

- No Risk or Low Risk: Interventions include:

- Basic counseling.
- Support from the school community, including teachers, peers, or parents.
- Engagement in stress management activities or mental health education.

Tier 2: Specialist Interventions

- Moderate Risk: Intervention is escalated to mental health specialists such as:
 - Psychiatrist or Psychologists.
 - Mental Health Gap Action Programme (mhGap) Trained Doctors. Refer to this link: <https://tinyurl.com/mhGap25>
 - Other mental health professionals, depending on availability.
 - Medical Doctors or obstetrician-gynecologist, for ARH concerns.

Tier 3: Critical and Emergency Interventions

- High Risk:
 - Non-Emergency Cases: Referral to hospitals for advanced mental health care.
 - Emergency Cases: Immediate action involves:
 - Law enforcement personnel (if safety is a concern).
 - Urgent transfer to medical facilities.

5. External Partnerships

- In schools without an RGC, cases are forwarded to:
 - Guidance Counselors from nearby schools.
 - Specialists from partner organizations or institutions.
- If required, involvement of the Learner Rights Protection Office (LRPO) is initiated per DO. 40, s. 2012 to address the legal and administrative framework.

6. Treatment and Aftercare

- Post-treatment, a focus is placed on aftercare and recovery:
 - Follow-up with the school counselor to ensure progress.
 - Collaboration between the school, mental health professionals, and the community to provide ongoing support.
 - Reintegration into the school environment with strategies to prevent relapse.

B. Internal and External Roles and Responsibilities

The composition of the referral process flow has certain roles and responsibilities in the Localized Internal and External Referral System.

The referral system aims to create a seamless transition from identification to recovery, ensuring the mental health needs of students are met effectively. Collaboration among internal and external stakeholders ensures that no learner falls through the cracks, promoting a supportive and mentally healthy school environment. Enlisted here are the roles and responsibilities in the internal and external referral system:

a. Learners/Peer Navigator

Learners have direct engagement with their peers which necessitates them to have direct access to crucial information about their peers with observed mental health concerns. They may inform the school personnel such as the teacher, adviser, guidance counselor/designates, and school administrator about the incident/observed behavior. They can also assist and accompany a peer to report an incident/observed behavior and teenage pregnancy.

b. Parents or Guardians/Authorized Guardians

Parents/Guardians play vital roles and responsibilities in implementing the localized referral system. Their involvement and coordination with the concerned individuals are necessary for establishing the stability of the referral process flow. Parents may inform the teacher/adviser to seek assistance preferably from school mental health coordinators or guidance counselors/designates. A Parent-counselor conference shall be done if there has been an incident/issue/report concerning the learners and they must acknowledge the advice/suggestions for whatever intervention will be served.

c. Teachers

Teachers play a crucial role in ensuring the mental well-being of learners by taking immediate action when incidents are reported or observed. Below are their detailed responsibilities:

1. Informing Parents/Guardians and Guidance Designates:

Upon observing or receiving reports of a mental health-related incident, teachers must immediately inform the parents/guardians of the learner. Communicate the details of the incident, the steps taken, and the possible need for intervention. Notify the Guidance Counselor or Guidance Designate about the case and provide the necessary documentation or observations.

2. Acknowledging and Implementing Alternative Delivery Mode (ADM):

If the learner's situation necessitates a temporary shift in learning modality, teachers must acknowledge and support the transition from face-to-face classes to an appropriate Alternative Delivery Mode (ADM) (e.g., modular, online learning). Ensure the learner receives the necessary materials, guidance, and support during the ADM period. Monitor the learner's progress and provide regular updates to the school head, guidance counselor, and parents/guardians.

3. Maintaining Confidentiality:

Respect the privacy of the learner by handling the case with discretion and ensuring that sensitive information is shared only with authorized personnel.

d. School Head

The school head oversees the proper implementation of the referral process and ensures the safety and well-being of all learners. Specific responsibilities include:

1. Receiving and Addressing Complaints/Reports:

Serve as the primary recipient of any complaints or incident reports from teachers, parents, or other school personnel. Ensure that reports are documented and that immediate steps are taken to address the situation. Convene relevant school personnel to discuss the case and determine the appropriate action plan.

2. **Coordination with External Support Services:**

If the case requires external intervention, coordinate with mental health specialists, law enforcement, or hospitals. Ensure the learner's safety and provide the necessary support during the referral process.

e. Non-Teaching Personnel

Non-teaching staff contribute to the early identification and reporting of mental health concerns. Their responsibilities include:

1. **Reporting Observed Incidents:**

Remain vigilant for signs of distress, behavioral changes, or incidents involving learners. Inform the appropriate personnel, such as the teacher, class adviser, Guidance Counselor/Designate, or school administrator, about any observed incidents. Provide clear and detailed information to aid in the assessment and intervention process.

2. **Supporting Interventions:**

Assist teachers and guidance counselors in managing the learner's needs by providing logistical or administrative support as required.

f. School Nurse

The school nurse plays an essential role in addressing immediate physical and psychological concerns. Their responsibilities are as follows:

1. **Applying First Aid:**

Administer first aid or initial medical assistance in cases where a learner is physically harmed or distressed. Stabilize the learner's condition and ensure their safety before referring them to the appropriate personnel.

2. **Referral to Guidance Counselor/Designate:**

If the learner's issue is beyond medical concerns (e.g., emotional or psychological distress), promptly refer the case to the Guidance Counselor/Designate for further evaluation. Document any medical interventions provided and share this information with the guidance team.

g. Guidance Counselor/Guidance Designate

The Guidance Counselor leads the assessment, intervention, and referral processes for learners experiencing mental health concerns. If the school has no Guidance Counselor, a Guidance Designate may perform the following except for counseling services. Responsibilities include:

1. **Intake Interviews and Risk Assessment:**

Conduct an intake interview with the learner to understand the situation thoroughly. Perform a risk assessment to determine the severity of the issue (e.g., no risk, low risk, moderate risk, or high risk).

2. **Accomplishing the Intake Sheet:**

Accurately and comprehensively fill out the intake sheet, which serves as the primary documentation for the incident. Include details such as the learner's background, the nature of the concern, observations, and any initial interventions undertaken. Forward the intake sheet to the School Head for further assessment and action.

3. Implementing Interventions:

Provide immediate support or counseling based on the risk level. For moderate or severe cases, coordinate with external mental health professionals or institutions.

4. Coordination with School and External Entities:

Work closely with the school head, teachers, and parents/guardians to ensure the learner receives the necessary support. Establish links with external organizations such as hospitals, community health workers, or law enforcement when necessary.

5. Monitoring and Aftercare:

Follow up on the learner's progress after interventions. Develop an aftercare plan that facilitates recovery and reintegration into the school environment.

C. Directory

The Department of Education through the Education Support Services Division-School Health and Nutrition Unit constructed a tool to be used in the localized referral system that will be disseminated to all schools through the Schools Division Offices and will be used to identify the key players, resources, coordinators and specialists for the internal and external referral system of each School across the Schools Division Offices in DepEd CALABARZON.

The directory will be collected through the use of Google Forms. This form will be disseminated by the Regional Office to the Schools Division Offices through the link <https://tinyurl.com/23LocalizedReferralGForms>. The SDO MHPSS Focal person will be tasked to disseminate their respective SDO GForms to the school district level's school head and guidance designates.

The directory will be monitored through the use of Google Sheets. This sheet will be accessed by the Schools Division Office MHPSS Focal Person and the Regional Office MHPSS Focal Person. School Heads, Guidance Designates can view the sheet though the link <https://tinyurl.com/23LocalizedReferralGSheets>.

Responsibilities by governance level in managing the directory

I. Regional Office

The Regional Office shall disseminate the Google Forms and Google Sheets to the Schools Division Offices and School District levels in the first quarter of FY 2025. The regional office must ensure that all Schools Division Offices have working Google Forms and Google Sheet links. The regional office shall evaluate the data gathered annually to determine the usability and effectiveness of the localized referral system and have feedback reporting every

end of the year with the use of an evaluation form that can be accessed through the link <https://tinyurl.com/2u4zfb2n>.

II. Schools Division Office

The Schools Division Offices' Mental Health Psychosocial Support (MHPSS) and ARH Division Focal Coordinators with the supervision of the Schools Division Medical Officers shall monitor and ensure that all Schools in the Schools Division have identified and accomplished the Directory within the 1st Quarter of 2025 and monitor the updates quarterly. They will also be responsible for reflecting the correctness of data in the Directory.

III. Schools

The School Head and guidance designate shall ensure that the School will identify and fill out the Directory within the first quarter of FY 2025 and update the data in the directory every quarterly.

Tabulated Data Collection Process

	Dissemination	Fill out and Updating	Monitoring (Correctness and Completeness)	Evaluation
Google Forms	Regional Office	School (<i>School Head and Guidance Designates</i>)	School (<i>School Head and Guidance Designates for correctness and completeness</i>)	
Google Sheets			Schools Division Offices (<i>MHPSS Focal for correctness and completeness</i>) Regional Office (<i>SMHP TA for completeness</i>)	Regional Office
Timeline		Jan-March 2025	April 2025 and every quarter thereafter	December 2025 and annually thereafter

D. Referral Forms

I. Internal Referral Form

In reference to the issued DepEd Order OUCI-2021-005 or the Guidelines on the Counseling and Referral System of Learners for S.Y. 2022-2021, Counseling Referral Form (Annex F), the school shall fill out the referral form and the referral acknowledgment form before referring the learner to the internal key players and professionals (see Annex B.1) and can be accessed through the link <https://tinyurl.com/4m7b8h62>.

II. External Referral Form

In reference to the 2019 SHD Form 3A, the school shall use and fill out the form to refer the learners to the external partners, professionals and resources (see Annex B.2) and can be accessed through the link <https://tinyurl.com/35zpadep>.

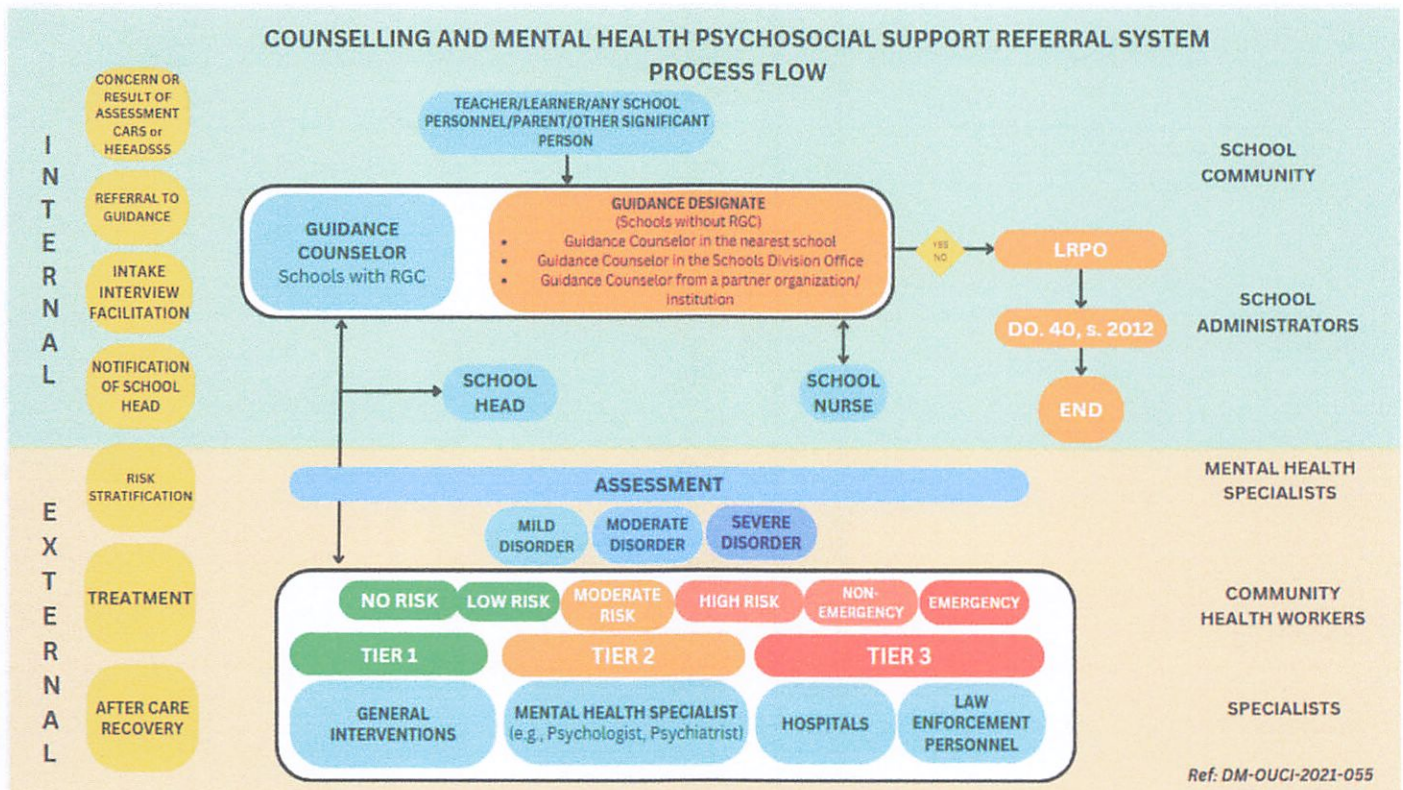
E. Funding

1. Funding source for the Regional Office and Schools Division Offices can be from funds released through Sub-Allotment Release Order (Sub-ARO) from the Bureau of Learner Support Services-School Health Division (BLSS-SHD) Program Support Funds, subject to the usual accounting and auditing rules and regulations. The Regional Offices and Schools Division Offices are expected to prepare their work and financial plan for the approval by their respective heads which shall serve as basis for the utilization of the funds. Liquidation of the Funds shall follow the National Government Accounting System (NGAS)
2. The Regional Office and Schools Division Offices are instructed to use their Maintenance and Other Operating Expenses (MOOE) to augment the funds provided by the BLSS-SHD
3. At the School level, funding for the effective and sustainable implementation shall be sourced from the budget for School MOOE in accordance with the School-Based Management System mandated in Republic Act No. 9155. Specifically, the MOOE budget shall finance the activities indicated in the School Action Plan for the School Mental Health Program and Adolescent Reproductive Health Program and incorporated in the School Work and Financial Plan as per DepEd Order 11 series 2021.

References


1. DM-OUCI-2021-055 Guidelines Counseling and Referral System for Learners SY 2020-2021
2. Republic Act No. 11036 - An Act Establishing a National Mental Health Policy for the Purpose of Enhancing the Delivery of Integrated Mental Health Services. https://web.senate.gov.ph/republic_acts/ra%2011036.pdf
3. Republic Act No. 10533 - Enhanced Basic Education Act of 2013, <https://www.officialgazette.gov.ph/2013/05/15/republic-act-no-10533/>
4. DepEd Order No. 55, Series of 2013 - The Anti-Bullying Act of 2013. https://www.deped.gov.ph/wp-content/uploads/2013/12/DO_s2013_55.pdf
5. DepEd Order No. 42, Series of 2016 - Policy Guidelines on Daily Lesson Preparation for the K to 12 Basic Education Program. <https://www.deped.gov.ph/2016/06/17/do-42-s-2016-policy-guidelines-on-daily-lesson-preparation-for-the-k-to-12-basic-education-program/>
6. Republic Act No. 7610 - Special Protection of Children Against Abuse, Exploitation, and Discrimination Act
7. Convention on the Rights of the Child <https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child>

ANNEX A. Referral System Process Flow



ANNEX B. Referral Forms

B.1. Internal Referral Form

ANNEX F																									
<p style="text-align: center;">Guidelines in Referring Students to GCO</p> <p>A. CHECK THE LEARNER'S BEHAVIORS THAT INDICATE THE NEED FOR HELP</p> <p>A student who may need counseling would likely manifest the following behaviors:</p> <p>Talks aloud and distracts others in class Is often late or absent Performs very poorly in both oral and written exams Shows lack of interest and motivation in his or her studies Isolates himself or herself from the group Seems to be perpetually tired, anxious, depressed, irritable, angry, etc. Fails to submit work on time Manifests deterioration in grooming or hygiene Shows signs of dramatic weight loss or gain, etc. Talks about SUICIDE</p> <p>B. TALK TO THE LEARNER ABOUT THE NEED TO SEEK PROFESSIONAL HELP</p> <p>If you observe any of the above behaviors, here's how to proceed:</p> <ul style="list-style-type: none"> • Inform the learner and/or the parent regarding the behavioral patterns that you have observed in a professional and confidential manner. • Listen to the person's situation. • Suggest to the learner (and parents) that they may consider availing of the counseling services provided by the GCO for free. • Respect the person being referred. A learner has the option to refuse a referral. • However, if the behavior endangers his or her well-being and those of others, it is our responsibility to provide such help to the learner without necessarily getting his or her consent. 	<p style="text-align: center;">COUNSELING REFERRAL FORM</p> <table border="1" style="width: 100%;"> <tr><td>Name of Student:</td></tr> <tr><td>Grade & Level :</td></tr> <tr><td>Gender:</td></tr> <tr><td>Date of Referral:</td></tr> <tr><td>Reason/s for Referral:</td></tr> <tr><td> </td></tr> <tr><td>Initial Actions Taken:</td></tr> <tr><td> </td></tr> <tr><td>Did the student agree to be referred to GCO: YES NO</td></tr> <tr><td>Parent/Guardian's Name:</td></tr> <tr><td>Parent/Guardian's Contact Number:</td></tr> <tr><td>Referred by:</td></tr> <tr><td>Designation:</td></tr> <tr><td>Contact Number:</td></tr> </table> <p style="text-align: right;"></p> <p style="text-align: center;">-----</p> <p style="text-align: center;">COUNSELING REFERRAL ACKNOWLEDGEMENT FORM</p> <table border="1" style="width: 100%;"> <tr><td>To: (Referring Person / Unit)</td></tr> <tr><td>Designation/Department:</td></tr> <tr><td> </td></tr> <tr><td>This is to confirm that _____ whom you referred to us on _____ had started his/her session on _____ and is being attended by _____</td></tr> <tr><td>Kindly refer to the checklist below on the status of the case at hand.</td></tr> <tr><td> <input type="checkbox"/> Closed at Intake Interview <input type="checkbox"/> For Counseling <input type="checkbox"/> Counseling Sessions are on-going <input type="checkbox"/> Parent/Guardian Conference Conducted <input type="checkbox"/> Sessions Completed / Case Terminated <input type="checkbox"/> Student did not show up <input type="checkbox"/> Under Monitoring <input type="checkbox"/> Number of follow-ups made by the Counselor: _____ <input type="checkbox"/> Referred to _____ </td></tr> <tr><td>Thank you. Always for the welfare of students.</td></tr> <tr><td>Attending Guidance Counselor</td></tr> <tr><td> </td></tr> <tr><td>Date:</td></tr> </table>	Name of Student:	Grade & Level :	Gender:	Date of Referral:	Reason/s for Referral:		Initial Actions Taken:		Did the student agree to be referred to GCO: YES NO	Parent/Guardian's Name:	Parent/Guardian's Contact Number:	Referred by:	Designation:	Contact Number:	To: (Referring Person / Unit)	Designation/Department:		This is to confirm that _____ whom you referred to us on _____ had started his/her session on _____ and is being attended by _____	Kindly refer to the checklist below on the status of the case at hand.	<input type="checkbox"/> Closed at Intake Interview <input type="checkbox"/> For Counseling <input type="checkbox"/> Counseling Sessions are on-going <input type="checkbox"/> Parent/Guardian Conference Conducted <input type="checkbox"/> Sessions Completed / Case Terminated <input type="checkbox"/> Student did not show up <input type="checkbox"/> Under Monitoring <input type="checkbox"/> Number of follow-ups made by the Counselor: _____ <input type="checkbox"/> Referred to _____	Thank you. Always for the welfare of students.	Attending Guidance Counselor		Date:
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Gender:																									
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Thank you. Always for the welfare of students.																									
Attending Guidance Counselor																									
Date:																									
<p>C. INFORM GCO ABOUT YOUR REFERRAL.</p> <ol style="list-style-type: none"> 1. Accomplish the Counseling Referral Form from GCO. 2. Inform the GCO personnel regarding your referral either by phone or personal visit at the GCO. 3. Ask your student to schedule an appointment with the Guidance Counselor. In case of emergency, you may immediately accompany the student to the GCO. Otherwise, you may inform the student that he or she can meet with the assigned Guidance Counselor during the regular working hours. 																									

Reference: DM-OUCI-2021-055

B.2. External Referral Form

<p>2019 SHD Form 3A- Modified 09/04/2024</p> <p style="text-align: center;">Republic of the Philippines DEPARTMENT OF EDUCATION Region _____ Division of _____ _____ School Name/ID _____</p> <p style="text-align: center;">MEDICAL REFERRAL FORM</p> <p>To _____ (Agency) Date _____</p> <p>Address _____</p> <p style="text-align: center;">This is to refer to you:</p> <p>Name: _____ Age: _____ Sex: _____ Address/School: _____ Grade: _____</p> <p>Chief Complaint/ Presenting Problem: _____ _____ _____</p> <p>Impression: _____</p> <p>Remarks: _____ _____ _____</p>	<p>No. _____</p>
<p>_____ Name and Signature</p> <p>_____ Designation</p> <p>_____ Contact Number/ Institution</p>	

<p>Note: To be detached from upper portion and sent back to the school.</p> <p style="text-align: center;">RETURN SLIP</p> <p>Name of Institution _____</p> <p>Returned to _____</p> <p>Name of Patient _____ Date Referred _____</p> <p>Findings _____</p> <p>Actions/Recommendations _____ _____</p> <p>_____ Date</p>	<p>No. _____</p>
<p>_____ Name & Signature</p> <p>_____ Designation</p> <p>_____ Contact Number/ Institution</p>	

Reference: 2019 SHD Form 3A - Modified 09/04/24