Referral form (Primary phase)

**Please be aware that this information needs to be shared with other parties including the parent(s)/carer(s) in line with Data Protection procedures.**

**Please send form to** **admin@linksacademy.herts.sch.uk**

**Please note: Incomplete forms may be returned. Please ensure the form is completed fully and signed to prevent any delay**

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| **School Details:** |
| **Name of School:** |  |
| **Date:** |       |
| **Name of Staff member completing form ( You will need to be able to complete the form in full, or please give to a member of staff who can complete in full):** |       |
| **Your position within the school:** |       |
| **If not SLT, main SLT contact name:** |       |
| **Main SLT contact email address:** | **Main SLT contact tel no:** |
| **Is your school STEPS trained?** | **STEP On**  **Yes ☐ No  ☐** |
|  | **STEP Up**                **Yes ☐ No  ☐** |
| **What service are you requesting?** |
| **Cedars PSB provision** |  |

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| **Student Details:** |

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| **First name:** | **Middle name(s):** | **Family name/Surname:** |
| **Date of birth:**       | **Current Year Group:**       | **Female/Male/Trans:** Select |

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| **UPN:**       |
| **ULN:**       |

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| **School Census Details:** |
| **Ethnicity:**       | **Home language (if not English):**       |
| **English speaking ability:**      choose a level | **Interpreter required for family:**    Yes ☐ No  ☐    |
| **Eligible for free school meals:**    Yes ☐ No ☐ | **If yes, level of funding:**       |
| **In receipt of Pupil Premium:**      Yes ☐  No ☐  | **If yes, level of funding:**       |

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| **Level of Need:** |
| **Families First assessment:** Yes ☐  No ☐ | **Lead professional:**       | **Date instigated:**       |
| **Child in Need (CIN) in place:** Yes ☐  No ☐ | **Social worker:**       | **Date instigated:**       |
| **CP Plan in place:** Yes ☐  No ☐ | **Social worker:**       | **Date instigated:**       |

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| **Child Looked After (currently or previously):**          Yes ☐    Currently? ☐  Previously? ☐No ☐ |             **If yes, name of Local Authority with responsibility for care:** |

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| **SEND (please tick as appropriate):** |
| Not on SEN register                                                            ☐                                                              | **If on SEND register, what are the student’s main presenting needs?**      |
| SEND support                                                                      ☐ |
| Evidence being gathered for application for EHC         ☐ |
| EHCP Assessment pending                                                ☐ |
| EHCP pending                                                                      ☐ |
| Assessment feedback in place of EHCP                          ☐ |

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| **1st Parent/Carer details (the student’s main carer):** |
| **Full name:** | **Home tel:**       | **Mobile tel:**      | **Work tel:**      |
| **Address:**       | **Parent/carer email address:**      | **Relationship to student:** Select |

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| **2nd Parent/Carer details :** |
| **Full name:**      | **Home tel:**       | **Mobile tel:**      | **Work tel:**      |
| **Address:**       | **Parent/carer email address:**      | **Relationship to student:** Select |

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| **Current education circumstances** |
| **What are the current circumstances for the student?** |
| In school full time:          ☐ | In isolation/inclusion unit:     ☐  |
| On reduced timetable:   ☐ | On fixed term exclusion:        ☐ |

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| **Previous Schools** |
| Previous school:         |
| Main contact from SLT:         |
| Main SLT contact email address:         |
| School Address:         |
| School Tel No:          | School Fax No:         |
| Reason for leaving:      |
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| Previous  school:         |
| Main contact from SLT:        |
| Main SLT contact email address:        |
| School Address:         |
| School Tel No:         | School Fax No:        |
| Reason for leaving:       |

**It is important that you record ALL schools that the student has attended. Please record any other previous schools not listed above in the box below:**

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| **Click here to enter text.** |

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| **Foundation Stage:** |
|  | **Working Below ARE** | **Working At****ARE** | **Exceeding****ARE** |
| Communication and Language |       |       |       |
| Physical Development |       |       |       |
| Personal, Social and Emotional Development |       |       |       |
| Literacy |       |       |       |
| Mathematics |       |       |       |

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| **Key Stage 1 and 2:** |
|  | **Working Below ARE** | **Working At****ARE** | **Exceeding****ARE** |
| Reading |  |  |  |
| Writing |  |  |  |
| Maths |  |  |  |

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| **Attendance data** |
| **Period** | **Percentage** |
| **Attendance** | **Authorised absence** | **Unauthorised absence** |
| Current academic year |       |       |       |
| Previous academic year |       |       |       |
| Open to HCC Attendance:  Yes ☐ No ☐ | Internal support: Yes ☐ No ☐ | Penalty fine: Yes ☐ No☐ | Prosecution: Yes ☐ No ☐ |

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| **Fixed period exclusions** |
| Start date | No. of days | Reason |
|       |       |       |
|       |       |       |
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**Hertfordshire Behaviour Strategy - intervention information**

***Please be aware that this data may be referred to within the GDC if this child is permanently excluded***

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| **Tier 1** – the school provides support from its own resources to children who are beginning to experience behaviour difficulties (*please enter other interventions that are not already listed*) |
| School based intervention | Name/email of worker | Date started | Duration of work |
| Rewards & consequences programme |       |       |       |
| Behaviour expectations outlined  |       |       |       |
| TA floating classroom support |       |       |       |
| Draw and Talk interventions |       |       |       |
| Nurture Group |       |       |       |
| Pastoral Team support |       |       |       |
| Protective behaviours delivered by school |       |       |       |
| Internal Mentoring |       |       |       |
| Family services advice via School Family Support Worker |       |       |       |
| Therapeutic services  |       |       |       |
| SENDCo support |        |       |       |
| Advice from Special Schools  |       |       |       |
| Advice from other local school |       |       |       |
| Advice from Primary Behaviour Services |       |       |       |
| Child & Adolescent Mental Health Service (Step 1) |       |       |       |
| School Nurse |       |       |       |
| School Report ( please include type - HOY, SLT etc) |       |       |       |
| School based targeted interventions |       |       |       |
| Use of STEP On strategies |       |       |  |
| Other:       |       |       |       |

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| **Tier 2** – the school accesses enhanced support for children whose behaviour fails to improve (*please enter other interventions that are not already listed*)  |
| Intervention | Name/email of worker | Date started | Duration of work |
| Primary Behaviour Support |       |       |       |
| Local Behaviour Panel/Board advice |       |       |       |
| 1:1 support in class |       |       |       |
| School Family Worker support |       |       |       |
| Young Carers referral |        |       |       |
| Families First assessment |       |       |       |
| Youth Offending Team advice and guidance |       |       |       |
| Child & Adolescent Mental Health Service (Step 2) |       |       |       |
| ISL Educational Psychologist surgery time |        |       |       |
| SENDIASS |        |       |       |
| ISL SEND advice |       |       |       |
| Individual risk management plan |          |       |       |
|  Other:       |        |       |       |

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| **Tier 3** – the school accesses support from specialist local providers and/or other commissioned services (*please enter other interventions that are not already listed*) |
| Intervention | Name/email of worker | Date started | Duration of work |
| Small group work |       |       |       |
| Risk Assessment Management Plan |        |       |       |
| External parenting support |       |       |       |
| Intensive Families Support Team involvement |       |       |       |
| ESC Outreach programme |       |       |       |
| Primary Behaviour Outreach  programme |       |       |       |
| Primary Respite programme |       |       |       |
| Child & Adolescent Mental Health Service (Step 3) |        |       |       |
| Pastoral Support Programme |       |       |       |
| Police involvement |       |       |       |
| EHCP request submitted or assessment underway |       |       |       |
| Multi-agency meeting |       |       |       |
| ISL SEND Specialist Advice & Support Service (e.g. Autism or Sensory needs) |       |       |       |
| Exceptional Needs funding |       |       |       |
| ISL Education Support for Medical Absence |       |       |       |
| ISL Educational Psychology assessment |       |       |       |
| ISL Attendance Team  |       |       |       |
| Use of STEP Up strategies |       |       |       |
| Other:       |       |       |       |

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| **Tier 4** – the school accesses respite provision away from the school for children considered to be at immediate risk of permanent exclusion (*please enter other interventions that are not already listed*) |
| Intervention | Name/email of worker | Date started | Duration of work |
| Integration Team advice and support |       |       |       |
| In-patient mental health provision |       |       |       |
| Onsite primary provision at ESC/Locality space/Primary Support Base |       |       |       |
|  Other:       |       |       |       |

Further comments which may be useful in trying to place this student into another educational provision

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| Click here to enter text. |

**Parent/carer 1 signature:**

**Parent/carer 2 signature:**

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| **Why we need your information:**The data on this form is being gathered for the purpose of understanding your child’s education needs. Hertfordshire County Council will use this information to endeavour to meet these needs by offering services or a possible change of education.  As a Local Authority Hertfordshire County Council has a legal responsibility to identify children under the provisions of the Fair Access Protocol. The information you have provided will be used to allow us to fulfil this duty. If applicable – the information you have provided to us will be used alongside additional information obtained from your current school.  **What we will do with your information:**The information you give us will be held by the Integration Team of Hertfordshire County Council and will only be used to **endeavour to secure services or secure education provision.** In order to do this, we may share your information with * Schools
* Education Support Centres
* Teams within Childrens Services, Hertfordshire County Council
* Other Local Authorities if you move to another area

We may also share information with third parties if we are legally obliged to do so, for example if it necessary to safeguard or protect a child. We may also share information with the police or other agencies if it is necessary for the following purposes:a) the prevention or detection of crime b) the apprehension or prosecution of offendersc) the assessment or collection of any tax or duty or any imposition of a similar nature |
| **How long we will keep your information**The information that you supply to us will be kept on file for 25 years. |
| **What are your rights?**Hertfordshire County Council will be the Data Controller for this information. You have a number of rights over the data we collect and hold about you.* You have the right to be informed about what information we hold about you and how we use it.
* You have the right to request copies of any information the Council holds about you by making a subject access request.
* If information we hold about you is factually inaccurate you have the right to have it corrected.
* You have the right to object to the way we are using your data.
* You have the right to request that your data is deleted. However we may be unable to delete your data if there is a need for us to keep it. In this case you will receive an explanation of why we need to keep the data.
* You can also request that we stop using your data while we consider a request to have it corrected or deleted. There may be some circumstances in which we are unable to do this however we will provide an explanation if this is the case.
* In certain circumstances you may also request data we hold about you in a format that allows it to be transferred to another organisation.
* In the event that decisions are taken using automated processes you have the right to request that these decisions are reviewed by a member of staff and to challenge these decisions.

If you would like to request copies of your data, request that your data is deleted or have any other queries in relation to data which the Council holds about you please contact the Data Protection Team. Data Protection Team Hertfordshire County CouncilCounty HallPegs LaneHertfordSG13 8DQTel: 01992 588099Email: data.protection@hertfordshire.co.ukYou can also contact our Data Protection Officer at dataprotection.officer@hertfordshire.gov.uk or in writing to the address above.If you are unhappy with the way that Hertfordshire County Council has used your data or with the way we have responded to a request you also have the right to contact the Information Commissioner’s Office www.ico.org.uk . |