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| **Request for Intervention Primary Outreach Team** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **School:** | | | |  | | | | | | | | | | | | | | | | | | | | | **Name/Role/Email of school contact:** | | | | | | | | |  | | | | | | | | | | | | | | | | | | **ECT** | | |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Date:** | | | | | | |  | | | | | | | | |
| **For individual referrals** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Pupil’s name:** | | | | | | |  | | | | | | | | | | | **M/F:** | | | |  | | | | | | | | | | | **DoB:** | | | |  | | | | | **NC Year:** | | | | | | | | | |  | | | | |
| **Attendance**: | | | | | | | Select | | | | | | | | **Ethnicity:** | | | | | | | Select | | | | | | | | | | | **EAL:** | | | |  | | | | | **Home language:** | | | | | | | | | |  | | | | |
| **Punctuality:** | | | | | | | Select | | | | | | | **SEN Support:** | | | | | | | | Select | | | | | | | | | | | **Year expectations:** | | | | | | | | | | | Select | | | | | | | | | | | | |
| **Unauth. absences:** | | | | | | |  | | | | | | | **CiN/CP:** | | | | | | | |  | | | | | | | | | | | **Medical conditions:** | | | | | | | | | | |  | | | | | | | | | | | | |
| **Current involvement with other agencies:** | | | | | | | | | | | | | | | | | **LAC Team:** | | | | | | | | | |  | | | **Social Services:** | | | | | | | | |  | | | | **Early Help Team:** | | | | | | | | | | |  | | |
| **EP:** |  | | | | **SALT:** | | |  | | | | **CAMHS:** | | | | |  | | **CP:** | | | | | | | |  | | | **Other:** | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| **For class referrals** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name of class** | | | | | | | | |  | | | | | | | | **NC Year:** | | | | | | | Select | | | | | **Class Teacher:** | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Reasons for intervention**  ***Please provide specific details relating to main concern*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Level of concern:** | | | | | | **Low** | | | | **1** | | |  | | |  | | | | **2** | | |  | | | | |  | | | **3** | | | |  | | |  | | **4** | | | | | |  | | | **High** | | | | **5** | | |  |
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| **Strategies already implemented**  ***Please provide brief details of any strategies already implemented and the outcome of this work*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Anticipated outcomes** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **School / Parent consent** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signed:** | | | **Parent(s)** | | | | | | | |  | | | | | | | | | | **Headteacher** | | | | | | | | | | |  | | | | | | | | | | | | | **Date:** | | | | |  | | | | | | |
| **For individual referrals please complete the Behaviour for Learning assessment on page 3** and return with the referral request. A B4L assessment must be completed before individual interventions can commence. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please return completed paperwork to [OL\_PrimaryReferral@ormistonacademies.co.uk](mailto:OL_PrimaryReferral@ormistonacademies.co.uk) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **SEN**  **Code** | | **Description** | | | | | | | | | | | | | | | | | | | | | | | | **Ethnicity**  **Code** | | | | | | **Description** | | | | | | | | | | | | | | | **Ethnicity**  **Code** | | | | **Description** | | | | | |
| K | | Replaces SA & SA+ | | | | | | | | | | | | | | | | | | | | | | | | NOBT | | | | | | Not obtainable | | | | | | | | | | | | | | | OARA | | | | Other - Arab | | | | | |
| S | | Statement | | | | | | | | | | | | | | | | | | | | | | | | ABAN | | | | | | Asian – Bangladesh | | | | | | | | | | | | | | | OEGY | | | | Other - Egypt | | | | | |
| EHC | | Education, Health & Care Plan | | | | | | | | | | | | | | | | | | | | | | | | AOTH | | | | | | Asian – Other | | | | | | | | | | | | | | | OIRN | | | | Other - Iran | | | | | |
| SPLD | | Specific Learning Difficulties | | | | | | | | | | | | | | | | | | | | | | | | APAK | | | | | | Asian – Pakistan | | | | | | | | | | | | | | | OIRQ | | | | Other – Iraq | | | | | |
| SEMH | | Social, Emotional & Mental Health | | | | | | | | | | | | | | | | | | | | | | | | BAFR | | | | | | Black African | | | | | | | | | | | | | | | OKRD | | | | Other – Kurdistan | | | | | |
| HI | | Hearing Impairment | | | | | | | | | | | | | | | | | | | | | | | | BCRB | | | | | | Black Caribbean | | | | | | | | | | | | | | | OLEB | | | | Other – Lebanon | | | | | |
| VI | | Visual Impairment | | | | | | | | | | | | | | | | | | | | | | | | BOTH | | | | | | Black – Other | | | | | | | | | | | | | | | OMOR | | | | Other – Morocco | | | | | |
| MSI | | Multi-Sensory Impairment | | | | | | | | | | | | | | | | | | | | | | | | CHNS | | | | | | Chinese | | | | | | | | | | | | | | | WBRI | | | | White British | | | | | |
| PD | | Physical Disability | | | | | | | | | | | | | | | | | | | | | | | | MWAS | | | | | | Mixed White & Asian | | | | | | | | | | | | | | | WEEU | | | | White Eastern Europe | | | | | |
| ASD | | Autistic Spectrum Disorder | | | | | | | | | | | | | | | | | | | | | | | | MWBA | | | | | | Mixed White & Black African | | | | | | | | | | | | | | | WIRI | | | | White Irish | | | | | |
| OTH | | Other difficulties/disabilities | | | | | | | | | | | | | | | | | | | | | | | | MWBC | | | | | | Mixed White & Black Caribbean | | | | | | | | | | | | | | | WOTH | | | | White Other | | | | | |
| NSA | | SEN support but no specialist assessment of type of need | | | | | | | | | | | | | | | | | | | | | | | | OAFG | | | | | | Other – Afghanistan | | | | | | | | | | | | | | | WWEU | | | | White Western Europe | | | | | |

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| **B4L-Behaviour for Learning Assessment Primary Outreach Team** | | | | | | | | | | | | | | | |
| **School:** | |  | | **Name of Pupil:** | |  | | | | | **NC Year:** | | | Select | |
| **Completed by:** | | |  | | **Relationship to Pupil:** | | | |  | | | **Date:** | |  | |
|  | | | | | | | | | | | | | | | |
| **Please tick the appropriate value against each statement** | | | | | | | | | | | | | | | |
|  | | | | | | | **Rarely**  **1** | **Some times**  **2** | | **Fairly often**  **3** | | | **Often**  **4** | | **Always**  **5** |
|  | **Relationship with Self** | | | | | |  |  | |  | | |  | |  |
| **RS1** | is interested in learning | | | | | |  |  | |  | | |  | |  |
| **RS2** | has a positive opinion of her/himself | | | | | |  |  | |  | | |  | |  |
| **RS3** | can manage strong emotions such as anger and/or sadness | | | | | |  |  | |  | | |  | |  |
| **RS4** | has a belief that she/he is capable of being successful | | | | | |  |  | |  | | |  | |  |
| **RS5** | can independently make choices and try to solve problems | | | | | |  |  | |  | | |  | |  |
| **RS6** | can accept responsibility for own behaviour | | | | | |  |  | |  | | |  | |  |
| **RS7** | shows good self-control | | | | | |  |  | |  | | |  | |  |
|  | **Relationship with Others** | | | | | |  |  | |  | | |  | |  |
| **RO1** | is willing to work independently as appropriate | | | | | |  |  | |  | | |  | |  |
| **RO2** | socially aware of what is going on around him/her | | | | | |  |  | |  | | |  | |  |
| **RO3** | is willing and able to empathise with others | | | | | |  |  | |  | | |  | |  |
| **RO4** | is willing to ask for help | | | | | |  |  | |  | | |  | |  |
| **RO5** | is willing to behave respectfully towards adults in school | | | | | |  |  | |  | | |  | |  |
| **RO6** | is willing to behave respectfully towards peers | | | | | |  |  | |  | | |  | |  |
| **RO7** | is able to listen to others and be attentive | | | | | |  |  | |  | | |  | |  |
| **RO8** | **can co-operate and collaborate when working and playing in a group** | | | | | |  |  | |  | | |  | |  |
|  | **Relationship with Curriculum** | | | | | |  |  | |  | | |  | |  |
| **RC1** | is willing to engage with the curriculum | | | | | |  |  | |  | | |  | |  |
| **RC2** | can take responsibility for own learning | | | | | |  |  | |  | | |  | |  |
| **RC3** | is able to access the curriculum | | | | | |  |  | |  | | |  | |  |
| **RC4** | is willing to try new things and take risks | | | | | |  |  | |  | | |  | |  |
| **RC5** | can make mistakes and move on | | | | | |  |  | |  | | |  | |  |
| **RC6** | is self aware, knows how and when to get help | | | | | |  |  | |  | | |  | |  |
| **RC7** | motivated to complete tasks | | | | | |  |  | |  | | |  | |  |
| **RC8** | able to work unaided | | | | | |  |  | |  | | |  | |  |
| **RC9** | follows classroom rules and routines | | | | | |  |  | |  | | |  | |  |

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| **PARTNERSHIP AGREEMENT Primary Outreach Team**  **Office:** [**gkerr@olamail.co.uk**](mailto:gkerr@olamail.co.uk) **Tel: 020 3108 0358** |
| **The Team will** |
| * Acknowledge all referrals promptly by return email. *Please alert Primary Outreach Team if no response is received within 3 working days*. * Provide the school with the DBS reference number to enable appropriate checks at Reception * Arrange an initial meeting to gather further information and discuss the referral in more detail * Undertake at least two observations and give feedback to the key staff involved * Work with key staff to produce a Joint Intervention Plan, with appropriate target(s) that are specific, achievable and measurable and with an agreed review date * Work collaboratively with the school staff to develop their capacity to respond to pupils with SEMH needs * Support the implementation of the agreed **I**ntervention over the stated time frame (this may be extended due to unforeseen circumstances or as agreed with the school) * Keep the school informed regarding the alteration or cancellation of any appointments * Provide regular records of support throughout the intervention * Attend a review meeting to discuss progress made and any future actions required * Be availableto liaise with parents via the school, where possible and where appropriate |
| **The Mainstream School will** |
| * Identify a link person (Senco or member of SLT) in addition to the class teacher who will be available to liaise with PRIMARY OUTREACH TEAM staff and ensure that class teachers are involved in all referrals pertaining to their class. * Release staff for the agreed meeting times: * *Initial meeting* 30-45 minutes * *Feedback post observation* 15-30 minutes * *Meeting to summarise information from observations and discuss recommendations* 45-60 minutes * *Joint intervention planning* 60-90 minutes * *Monitoring meeting* 30-45 minutes * *Review*  45-60 minutes * For staff to be available at the agreed times to attend meetings regarding the intervention in order to gather information, monitor progress and to review and discuss the impact of the strategies implemented * Provide PRIMARY OUTREACH TEAM with relevant reports from other agencies, as appropriate * Work with Primary Outreach Team staff to produce a Joint Intervention Plan, with appropriate target(s) that are specific, achievable and measurable and with an agreed review date * Implement the intervention plan and any additional strategies over the agreed time frame * Inform the Primary Outreach Team (*see contact details at the top of the page*) about any known absences or non-availability of key staff or pupils involved, if at all practical (i.e. this may not be possible for the first lesson in the morning) * Provide agreed spaces to work/meet e.g. places to take groups, where possible * Complete an up-to-date Behaviour for Learning Assessment form in time for the review and email it to Primary Outreach Team to process * Complete and return the evaluation form to the Primary Outreach Team staff member, at the end of the intervention * Facilitate Primary Outreach Team liaison with parents prior to, during and post intervention where possible and where appropriate |