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| **rHONDDa cynon taf**  **Access and Inclusion Service** |  |
| **Specialist Placement Request (SPR2 - School) – October 2018**  **Evidence of School Based Provision** | |

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| **Pupil First Name:** |  | **Pupil Surname:** |  |
| **DOB:** |  | **School:** |  |

**Please Note:** Failure to complete relevant sections of the application and lack of supporting evidence may result in the application being returned for completion. Return to **Access & Inclusion Service, Ty Trevithick, Abercynon, CF45 4UQ.** [**SENAS@rctcbc.gov.uk**](mailto:SENAS@rctcbc.gov.uk)

This form should only be completed following a SPR1 request from SENAS and is for submission to a Specialist Placement Panel for consideration of a specialist placement. There must be clear evidence of severe difficulties, as defined by LA criteria and lack of progress **despite** school based learning support. In the case of a child requiring EOTAS provision due to medical needs, schools may complete this section without prior involvement of the Access and Inclusion Services.

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| **How we use your personal information**  The information on this form (and any additional information attached) will be used by the Access & Inclusion Service to discuss your child and their additional learning needs in line with the Council’s legal duty under Section 321 of the Education Act 1996 and may involve sharing special category information about your child with external specialists e.g. health professionals.  To learn about how your privacy is protected and how and why we use your personal information to provide you with services, please visit our service privacy notice here [[www.rctcbc.gov.uk/serviceprivacynotice](http://www.rctcbc.gov.uk/serviceprivacynotice)](http://www.rctcbc.gov.uk/serviceprivacynotice) and the Councils data protection pages here [www.rctcbc.gov.uk/dataprotection](http://www.rctcbc.gov.uk/dataprotection). |

**SECTION 1: SCHOOL SUPPORT PROVIDED AT SA/SA+ or EYA/EYA+**

|  |  |  |
| --- | --- | --- |
| **Support and monitoring at School Action/Early Years Action (SA/EYA) and School Action Plus (SA+) and Early Years Action Plus (EYA+)** | | |
| Date placed at School Action (SA) or Early Years Action (EYA) |  | |
| Dates of IEP reviews at SA / EYA involving parents/carers | 1. | 2. |
| Date placed at SA+ / EYA+: |  | |
| Dates of IEP review SA+ / EYA+ involving parents/carers | 1. | 2. |

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| **Additional hours of school based support** | | | |
| Individual SNSA support (in class) |  | Small group SNSA support (withdrawal group) |  |
| Other |  | | |

**SECTION 2: ASSESSMENT DATA**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Results of National Tests** *(Please provide data from the last assessments)* | | **Date of Assessment** | **Results of Assessment** | **Date of Assessment** | **Results of Assessment** | **Date of Assessment** | **Results of Assessment** |
| Maths | Reasoning |  |  |  |  |  |  |
| Procedural |  |  |  |  |  |  |
| Reading  (English) | Comprehension |  |  |  |  |  |  |
| Reading  (Welsh) | Comprehension |  |  |  |  |  |  |
| Please record any areas of particular strength: | | | | | | | |
|  | | | | | | | |
| Pupil Views: | | | | | | | |
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| **Foundation Phase Outcomes** | **Current Outcome Achieved** | **End of FP Outcome** | **National Curriculum Area** | **Teacher Assessment** | | |
| **Current Performance** | **End of KS2 levels** | **End of KS3 levels** |
| Language, literacy & communication skills |  |  | Welsh *(first language)* |  |  |  |
| Mathematical development |  |  | English |  |  |  |
| Personal & social development, well-being & cultural diversity |  |  | Mathematics |  |  |  |
|  | | | Science |  |  |  |

**SECTION 3: ATTENDANCE & EXCLUSION DATA**

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| --- | --- | --- |
| **Attendance** | **Current academic year** | **Previous academic year** |
| **Percentage (%)** | **%** | **%** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Exclusion** | **Number of incidents** | **Number of days** | **Reasons for Exclusions** |
| **Current academic year** |  |  |  |
| **Previous academic year** |  |  |  |

**SECTION 4: HISTORY OF SCHOOL BASED INTERVENTIONS AND SUPPORT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Start Date of Intervention** | **Nature of Intervention** | **Assessments Undertaken** | **Frequency/Duration**  **of Intervention** | **Staffing Ratio e.g. 1:1, 1:6** | **Evaluation and Progress** | **Supporting Evidence attached (please tick)** |
|  |  |  |  |  |  |  |
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**SECTION 5: EXTERNAL AGENCY INVOLVEMENT**

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| --- | --- | --- | --- |
| **Name** | **Agency** | **Date of Last Involvement** | **Supporting Evidence attached (please tick)** |
|  |  |  |  |
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***Please ensure copies of all relevant reports are appended***

**SECTION 6: DECLARATIONS**

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| --- | --- | --- | --- | --- | --- |
| **Parent / guardian**  I am aware and I understand that my child will be discussed by the Access & Inclusion Service regarding a Specialist Placement request**.**  Please advise the Service if you would like your correspondence in Welsh or English | | | | | |
| Parent / guardian name: |  | | | Parent / guardian signature: |  |
| Date: |  | Additional notes: |  | | |

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| **Headteacher**   * I confirm that the information contained in this form (and any additional information attached) is accurate. * I have made the parent/guardian aware of: * how the personal data will be used to identify additional support if appropriate. * how they can access their information rights and further information via the Data Protection pages of the Council’s website. | | | | | |
| Head Teacher name: |  | | | Head Teacher signature: |  |
| Date: |  | Additional notes: |  | | |