

Appendix C

SEND and Inclusion Request for Involvement Form

If you know, please indicate which team you would like involvement from:		
EWEL		
Communication and Interaction		
Cognition and learning, Sensory Motor Team		
Do you require an Assistive Technology assessment?	Yes	No

Please indicate which form of involvement you are requesting

- School support – please outline request in box below
- Child / young person involvement

The SEND and Inclusion Service consists of a range of specialist teams (please see accompanying overview sheet). Based on the information you provide we will identify which team is the most appropriate to respond to your request. Initial allocations may be reviewed following additional information becoming available.

Name of school:	Col Number:		
Name of person completing form:	Role:		
Email:	Telephone:		
Are you the most appropriate person to contact regarding this request?	Y	N	
If no, please provide:			
Name of appropriate contact:	Role:		
Email:	Telephone:		

Option 1: School Support

<p>Details of support requested:</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>Please contact Col lead/link if you would like to discuss this further.</p> <p>Date:</p>

Option 2: Child/Young Person Involvement (if required)

Pupil Details – if involvement relates to a child/young person			
Name:			
Date of birth:		Year group:	
Address:		Telephone:	
Parent(s) / Carer(s) / Person(s) with parental responsibility:		Parent/Carer Email Address:	
Address (if different from above):		Telephone:	
	Y	N	
Is the child Looked After?			If yes, name / tel no. of Social Worker:
Is a TAF in place for the child?			If yes, date of next meeting: Lead professional:
Please indicate whether the child:			
	Y	N	
Has an EHCP			<i>Please provide most recently updated copy</i>
Has a SEN Support Plan			<i>Please provide most recently updated copy</i>
Has any formally identified needs			Please detail:

Please identify the other services involved with this pupil:

Service	Name of professional	Date of most recent involvement	Report available Y/N

What are the child/young person's views on the intended involvement?

Following SEND and Inclusion Service involvement, what outcomes for this pupil would you and parent(s) / carer(s) hope to see over the next 3 months that would reduce your concerns?

School:

Parents/Carers:

For school use only:

Please tick resourcing option that applies and provide details related to this:

Existing CoL Service Level Agreement		CoL No:	
Agreed by Behaviour Partnership Panel		Panel area:	
Use of delegated Behaviour Panel Credits		Panel area:	
Individual school resourcing		Agreed by:	

Please send your request to epsdurham@durham.gov.uk and copy to your Link Partner for reference

Parent / Carer consent for involvement

Consent from parent(s) / carer(s) is required before this request for involvement can progress. The reason for the request and the full contents of this form should have been discussed with you and, where appropriate, with your child.

Professionals from the SEND and Inclusion Service will work in partnership with you. Their work may include:

- Consultation with you and members of school staff who know your child
- Observing your child in the classroom and during unstructured times of the day
- Working directly with your child
- Communicating with other professionals about your child
- Producing written reports, of which you will get a copy

The professional involved with your child will keep written and computer-based records of their involvement. They may need to share this information with professionals from other services if it is appropriate to do so in the interests of supporting your child. All staff in our teams have a duty to pass on information if they have concerns about the child's welfare or safety.

Do you consent to the SEND and Inclusion Service becoming involved with your child?		Y	N
Signature of parent / carer:		Date:	
Signature of member of school staff completing form:		Date:	
Signature of pupil:		Date:	

- Please note that for requests for involvement to be accepted it is required that:
 - All signatures have been obtained
 - All required documentation is included, e.g. SEN Support Plan
 - The request form is completed in full and contains sufficient information to be directed to the most appropriate member of the team.

Date request received: