**SECONDARY BEHAVIOUR SUPPORT**

**ALTERNATIVE PROVISION REFERRAL FORM**

Please complete this form in full and email it together with any relevant documents to

[ian.fordham@enfield.gov.uk](mailto:olivia.wittich@enfield.gov.uk) / hajer.kahraman@enfield.gov.uk

If areas of the form are incomplete it may be returned before any intervention can take place.

If you have any queries, please contact the Secondary Behaviour Support Team on 020 8132 0314

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| **School Details**  Name of Referring School Name of School Local Authority Date on Roll of referring school   |  |  |  | | --- | --- | --- | |  |  |  |   Main Contact Person Contact Number/s Contact Email   |  |  |  | | --- | --- | --- | |  |  |  |   Reason for Referral e.g. risk of PEX, attendance   |  | | --- | |  |     **Student Details**  Legal First Name Middle Name Legal Surname   |  |  |  | | --- | --- | --- | |  |  |  |   Date of Birth Gender Ethnicity   |  |  |  | | --- | --- | --- | |  | Choose an item. |  |   Year Group ULN UPN   |  |  |  | | --- | --- | --- | | Choose an item. |  |  |   **\*PLEASE INPUT EITHER ULN OR UPN**  Learner Home Address   |  | | --- | | Post Code: Borough of Residence: |     Home Language Religion Telephone Number (optional)   |  |  |  | | --- | --- | --- | |  |  |  |     **Main Contact Details**  Title First Name Second Name Contact Type  (Mum/Dad/Step Parent/Carer etc)   |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  |   Telephone Number 1 Telephone Number 2 Email address   |  |  |  | | --- | --- | --- | |  |  |  |     Is the address the same as the young person’s? Yes No  If no please enter address below   |  | | --- | | Post Code: Borough of Residence: |   Is the Child LAC? Choose an item.    Does the Child have any Gang Affiliations ? Choose an item.  If yes please add details below   |  | | --- | |  |     Are there any unsafe areas for the YP to enter?  If yes, please choose from the options below  Choose an item.  Choose an item.  Choose an item.   |  | | --- | | Any other unsafe areas not mentioned |   Strengths Areas to work on/needs Any Post 16 Interests   |  |  |  | | --- | --- | --- | |  |  |  |   Has the young person completed a 12 week course of 1:1 mentoring with the Enfield Outreach Behaviour Support team in the last two academic years? If YES, please confirm dates of the mentoring.  Start Date End Date    **Welfare Information (Details of any outside agency involvement)**   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **AGENCIES** | **KEY WORKER NAME** | **CONTACT DETAILS** | **CURRENTLY INVOLVED?**  **YES NO** | | | CAMHS/EP |  |  |  |  | | Education Welfare |  |  |  |  | | Health Service |  |  |  |  | | Social Care |  |  |  |  | | Child Sexual or Criminal Exploitation Team |  |  |  |  | | Youth Offending Service |  |  |  |  | | Prevent |  |  |  |  | | Police |  |  |  |  | | FASH |  |  |  |  | | Change and Challenge |  |  |  |  | | Compass/Drug Agency |  |  |  |  | | LAC |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Additional Social Care Information  (Please highlight any that apply) | **CIN** | **CP** | **CSE** | **PREVENT** |   **SEN Details - Please select status below**  Choose an item.  Details of SEN |

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| **Medical Details**  Medical Practice Address Telephone Number   |  |  |  | | --- | --- | --- | |  |  |  |     **Medical Details**  **School History/Assessment**  Name of Previous School Date Started Date Left   |  |  |  | | --- | --- | --- | |  |  |  |   Name of Previous School Date Started Date Left   |  |  |  | | --- | --- | --- | |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | |  | **ENGLISH** | **MATHS** | **SCIENCE** | | KS2 |  |  |  | | KS3 |  |  |  | | Current National Curriculum level (must complete) |  |  |  | |  | | | | | Most current Reading Age | Age: | Date Tested: |  | | Most current Spelling Age | Age: | Date Tested: |  | |  |  |  |  | | KS4 Subjects | Exam Board | Coursework completed | Estimated Grade | | ENGLISH |  |  |  | | MATHS |  |  |  | | SCIENCE |  |  |  | | Other optional subjects (please list below) |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  |   **Exclusions Summary**  Date Number of days Reason for Exclusion   |  |  |  | | --- | --- | --- | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  |   **School Attendance Figures**  Current Academic Year Attendance Percentage    No. of Possible Sessions No. Sessions Attended Last Attendance Date Unauthorised Absence   |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  |   Please give FULL details for this referral and include any support that has/had been arranged for the learner  **School Interventions/Support offered to YP (please mark) Brief Details**  Support in school – TA / Mentor  PSP  Alternative Provision  Prevent Mentor  School Counsellor / EP  Early Help Form  **View of Parent/Carer(s)/Guardians**  Please take this opportunity to highlight the views of the parent/carer(s) regarding their child’s needs e.g. Do they experience similar concerns within the home environment?  Please identify the hopes of the parent/carer(s) for their child. SBSS Behaviour Risk Assessment  |  |  |  |  | | --- | --- | --- | --- | | **Assessing the risk to Health and Safety** | **High** | **Med** | **Low** | | Evidence of physical assault against peers |  |  |  | | Evidence of verbal abuse towards peers |  |  |  | | Evidence of physical assault against adults/staff |  |  |  | | Evidence of verbal abuse towards adults/staff |  |  |  | | Evidence of criminal activities |  |  |  | | Evidence of sexualized behaviour |  |  |  | | Evidence of bullying |  |  |  | | Evidence of Arson/Fire setting |  |  |  | | Evidence of vulnerability – self harm |  |  |  | | Punctuality/Attendance concerns |  |  |  | | Concerns around educational attainment |  |  |  | | Evidence around disrupting lessons or peer groups |  |  |  | | Evidence of racism or homophobic language/groups |  |  |  | | Evidence of alcohol/substance misuse |  |  |  | | Concerns around parental support |  |  |  | | Concerns around self-esteem |  |  |  | | Concerns around mental health |  |  |  | | Concerns around medical needs |  |  |  | | Concerns around social withdrawal |  |  |  | | Possession/use of weapons |  |  |  | | Leaving site without permission |  |  |  | | Gang involvement |  |  |  | | Does any E.P report indicate a risk of violent behaviour |  |  |  | | Any student allegations against members of staff |  |  |  | | Any parent/guardian allegations or threats against members of staff |  |  |  |   In your professional opinion, and in the SSC setting, does this student present a significant risk? If so, summarise your concerns referring to available evidence.   |  |  |  |  | | --- | --- | --- | --- | | **Additional Resources or Support [other than routinely available]** | **Yes** | **No** | **?** | | Full time attendance of an additional member of staff |  |  |  | | Special training for staff? |  |  |  | | Maximum group size? |  |  |  | | Special supervision during breaks, outside activities or particular subject areas? |  |  |  | | Additional staffing ‘on hand’ |  |  |  | | Other [please specify]  Pastoral support from educational setting |  |  |  |   In your judgement, does this student require a higher level of risk assessment before proceeding further?  Is there sufficient information available on this student to make this decision valid?   |  | | --- | | What is the desired outcome or impact for this referral?  Are there any other comments that you feel would be helpful for Behaviour Support to consider? | | **REFERRER NAME:**  **REFERRER SIGNATURE:**  **DATE:** | | **PARENTAL NAME:**  **PARENTAL SIGNATURE:**  **DATE:** |   **PLEASE NOTE THIS REFERRAL CANNOT BE PROCESSED WITHOUT PARENTAL SIGNATURE** |

**Please see Privacy Notice Below**

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| **Enfield Secondary Behaviour Support Privacy Notice** |

**PLEASE READ AND SHARE WITH PUPILS / GUARDIANS BEFORE SUBMITTING A REFERRAL**

When processing your personal data, we must tell you what we are doing with it. You have the right to know why we need it, what we’ll do with it and who we are going to share it with. This privacy notice was updated March 2022.

**Our contact details**

Name: Secondary Behaviour Support Service London Borough of Enfield

Address: John Wilkes House, Hertford Road London EN3 4EN

Phone Number: 02083791000

Email: sbss@enfield.gov.uk

**Personal Information**

The information which you supply to us will be used to:

* + - * Support pupil behaviour in an educational setting
* Provide appropriate pastoral care
* Assess the quality and the equality of our service
* Assess pupil trends in Enfield and design services that meet the presenting and future needs

**The categories of the information that we collect, process, hold and share include:**

* Personal data (name, contact details, date of birth)
* Characteristics such as attendance, exclusions, known presenting behaviours and strategies used by educational settings, SEND information, any other agency involvement, family background and intended outcomes
* Behaviour Support Plans, Pastoral Support Plans detailing interventions that have been delivered in educational settings
* Contact/intervention records that include next steps and progress against identified outcomes
* Database that tracks intervention progress
* Where pupils are referred to Alternative Provision or for an Education Health and Care Plan assessment information maybe shared with relevant agencies
* Evaluation surveys with schools, parents and pupils

We may also ask for sensitive information which the UK GDPR refers to as special categories data such as:

* + personal data revealing racial or ethnic origin;
  + personal data revealing religious beliefs;
  + genetic data;
  + data concerning health

**Information sharing**

We routinely share pupil information with:

• Referring school (regularly)

• Parents/Carers

• Local Authority

• Other agencies that maybe co-working the case. Eg Early Help workers, CAMHS, CYPS, Educational Psychology, Autism Outreach Service, Speech and Language, other medical professionals

• DFE/Ofsted

## The lawful basis on which we use this information

The lawful basis on which we use this information is consent [UK GDPR Article 6 (1)(c)]. Schools obtain parental consent for the referral and the processing of personal data for the BSS team to deliver a service to the pupil/parent/carer.

The Council may also rely on Article 6 (1)(d), where appropriate in order to protect the vital interests of our children and young people.

Some of the information we need to hold is classed as special category information – primarily ethnicity, gender, and any health conditions. In addition to the above lawful bases, we will process this type of information where we have explicit consent [Article 9(2)(a)] or it is needed to protect their vital interests [Article 9(2)(c)].

## Data retention

We hold pupil data for 7 years from the end of our intervention. All information is held securely with physical, organisational, and electronic access controls to safeguard the information both at rest and when in transit.

**Your data protection rights**

Under data protection law, you have rights including:

**Your right of access** - You have the right to ask us for copies of your personal information.

**Your right to rectification** - You have the right to ask us to rectify personal information you think is inaccurate. You also have the right to ask us to complete information you think is incomplete.

**Your right to erasure** - You have the right to ask us to erase your personal information in certain circumstances.

**Your right to restriction of processing** - You have the right to ask us to restrict the processing of your personal information in certain circumstances.

**Your right to object to processing** - You have the the right to object to the processing of your personal information in certain circumstances.

**Your right to data portability** - You have the right to ask that we transfer the personal information you gave us to another organisation, or to you, in certain circumstances.

You are not required to pay any charge for exercising your rights. If you make a request, we have one month to respond to you.

If you would like to exercise one of your data protection rights, please contact [complaintsandinformation@enfield.gov.uk](mailto:complaintsandinformation@enfield.gov.uk) with your request.

**Contact**

If you have a concern about the way we are collecting or using your personal data, we request that you raise your concern with us in the first instance.

Please contact: Mervin Cato Head of Secondary Behaviour Support [mervin.cato@enfield.gov.uk](mailto:mervin.cato@enfield.gov.uk) for further information regarding this privacy notice.

Alternatively, you can contact the Information Commissioner’s Office at <https://ico.org.uk/concerns/>