

**Keys Co-Operative Academy**

**INFORMATION PASSPORT 2020 - 2021**

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| **Name of Student** | **Year Group** | **Referring School** | **EHCP/SEN Support** |
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Please list in rank order the **three main concerns**, in the school’s view, as to why you are making this referral.

**Ranking – 1 the most important and 3 the least**. If you state ‘other’, it is important that you state what

‘other’ actually is. Only make three choices if it is appropriate.

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|  | Unwillingness to follow school rules |
|  | Relationships with other students |
|  | Relationships with staff |
|  | Family issues, impacting at school |
|  | Community issues impacting at school |
|  | Inability to access a mainstream curriculum |
|  | Unwillingness to access a mainstream curriculum |
|  | School attendance issues |
|  | Primary to secondary transition |
|  | Health concerns |
|  | A one-off incident of a serious nature |
|  | Other (please state) |

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| **Summary of Issues** | |
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Briefly summarise the issues, in date order with the oldest first, linking them to information on the referral form.

**Please upload completed referral form to a**[**dmissions@kcat.co.uk**](mailto:admissions@kcat.co.uk)

**If you wish to discuss this referral please email a**[**dmissions@kcat.co.uk**](mailto:Admissions@kcat.co.uk) **or**

**telephone on 01621 856275 ext 224 or 01206 852156 ext 128.**

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| [**Section 1**](#_2mp1tkpqfkd1) **- Basic Information**  [**Section 2**](#_kt5vxj750nsv) **- School Details**  [**Section 3**](#_o5ix8gr8i29r) **- SEN Status**  [**Section 4**](#_9u3i12as9daj) **- Reason for the referral**  [**Section 5**](#_z5jxktz17jwo) **- Attainment data** | [**Section 6**](#_fs7n8471fqnm) **- Involvement of others**  [**Section 7**](#_s4o45draftkn) **- School’s view**  [**Section 8**](#_9sanrd5pgjqh) **- Progression plan**  [**Section 9 -**](#_vlibxb3bby45) **Learning profile**  [**Section 10**](#_eo9qefpno14c) **- Aspirational profile** |



### Section 1- BASIC INFORMATION

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| **Legal Surname:** | | | | **First Name:** | | | **Also Known as:** | | **Gender:** | |
| **Preferred Surname:** | | | |
| **Date of Birth:** | | **Age:** | **School Year:** | | | **UPN:** | | **ULN:** | | |
| **Country of birth:** | | | **Nationality:** | | | | **Proficiency in English (if EAL):** | | | |
| **LAC:** ☐ | **FSM** | | **One Plan :** ☐  *Please attach cycles to Panel Papers* | | | | **PSP/IEP:** ☐  *Please attach to Panel Papers* | | | |
| **Current school:** | | | **Contact name:**  **Position:**  **Telephone Number:**  **Email**: | | | | Positive Referral Level 1  **Re-referral: No ☐**  If yes, date of first referral: | | | ☐ |
| **Start Date:** | | |
| **Ethnicity:** | | | | **Does the student have a safeguarding file? Yes**  If **yes**, please give contact details of a person in your school this can be discussed with:  **Name**:  **Contact Number**: | | | | | | |
| **Home Language:** | | | | **Relevant Medical Information:** | | | | | | |
| **Children’s Services legal status:**  Choose an item. | | | | **Named contact**: | | | | | | |
| **Person with Parental Responsibility**:  **Relationship to young person:** | | | | | **Contact Address:**  **Mobile telephone number:** | | | | | |
| **Siblings:** | | | | |
| **Placement:**  Are there any other students that this applicant may have issues with that could affect progress in alternative provision? | | | | | | | | | | |
| **School Signature:**  In making this referral, the school agrees to the release of appropriate funds (for example, AWPU, SEN or Standards Funds) to contribute to the support of alternative provision. This application has involved the young person and parent/carer. | | | | | | | | | | |

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| **Signed on behalf of the School:** | **Name:** |
| **Position:** | **Date:** |

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| Section 2 - SCHOOL DETAILS | | | | | | | | | | |
| **Exclusion History (most recent first)** | | | | **% Exclusion Rate** | | | | **Current Year:** | |  |
| **Previous Year:** | |  |
| **Date:** | **Duration:** | | **Reason:**  **Please indicate whether internal or external exclusion** | | | | | | | |
|  |  | | **I**☐ **E**☐ | |  | | | | | |
|  |  | | **I**☐ **E**☐ | |  | | | | | |
|  |  | | **I**☐ **E**☐ | |  | | | | | |
| **PREVIOUS SCHOOLS** | | | | | | | | | | |
| **Name of School:** (most recent first) | | **Start and Leaving Dates:** | | | | | | | **Reason for Transfer:** | |
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| **ATTENDANCE DATA** | | | | | | | | | | |
| **Current Year Attendance %:** | | | | | | **Previous Year Attendance %:** | | | | |
| **PRIMARY AREA OF NEED**  In line with the Graduated Approach, please summarise any relevant interventions, targeted or otherwise, that have been undertaken in relation to the above, and append to this application any related evidence.   |  |  | | --- | --- | | Please number where relevant the following categories in rank order. Where an action is not relevant, please leave blank. | | | * Cognition and Learning * Communication and interaction | * Social, Emotional and Mental Health * Sensory and Physical | | | | | | | | | | | |

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| Section 3 - SEN STATUS, IF ANY | | |
| **Please indicate SEN Status** | | |
|  | Yes? |  |
| None |  | Undergoing Statutory Assessment |
| SEN K |  | If Yes to above, how many weeks into the process? |
| EHCP Plan |  | Name of linked Educational Psychologist:  Click here to enter text. |
| EHCP Category: |  | *Please attach any appropriate SEN documentation to application.* |
| Section 4 - Please outline the reasons for this referral: | | |



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| Levels of Positive Referrals and Financial  Heybridge Co-operative Academy (HCA) and North East Essex Co-operative Academy (NEECA) are able to offer a positive referral as an alternative to permanent exclusion, or where additional help is required for a particular pupil.  The Local Authority will be looking at the following as minimum requirements before a positive referral could be considered:   * Use of school action/plus and demonstrable use of Personal Learning Plan or Pastoral Support Plan to address the pupil’s needs; * Engagement with parents with the support of other agencies where necessary; * Evidence of engagement of multi-agency support; * Consideration of a managed move; * Consideration of an alternative education programme and work related learning where applicable; * Interim annual review or discussion with E.P. and/or Locality Casework Manager for a pupil with an EHCP.   As with permanent exclusions, there will be a financial implication for the school for pupils referred to HCA or NEECA in this way which will be discussed and can be negotiated on a case by case basis. Positive referrals are generally categorised as follows;  **Level One – Referral for a one off serious incident, which would normally lead to a permanent exclusion**. The pupil would not be expected to return to the referring school but would remain on the school roll until an alternative school placement is secured. HCA or NEECA will present the pupil to the Behaviour and Attendance Partnership (BAP) meeting so that success criteria can be decided for the pupil. HCA or NEECA and the BAP will work together to secure a suitable placement for the pupil when they are ready to progress from HCA and NEECA.  Funding = Charge of £1500 per term and 1/3 AWPU per term (AWPU only for primary schools).  **Level Two – Persistent disruptive behaviour that places the child at risk of permanent exclusion**. The placement would be time limited for up to two terms and the pupil will be expected to return to the referring school in most cases. The School and HCA or NEECA will decide on the pupils success criteria and once these have been met the pupil will return to school. Termly reviews will be held involving HCA or NEECA and a senior member of school staff to monitor progress and agree reintegration plans. Levels three and four (below) will have been explored where appropriate.  Funding = Charge of £1500 per term and 1/3 AWPU per term (AWPU only for primary schools).  **Level Three – Pupil would benefit from a shared placement with HCA or NEECA and the** **school.** The placement would be time limited for up to two terms and the pupil will be expected to return to the referring school. The School and HCA/NEECA will decide on the pupils success criteria and once these have been met the pupil will return to school. Termly reviews will be held involving HCA/NEECA and a senior member of school staff to monitor progress and agree reintegration plans. Level four (below) will have been explored where appropriate.  Funding = Initial charge of £1500 pro rata and AWPU pro rata (AWPU only for primary schools) based on provision made by HCA/NEECA.  **Level Four – Early intervention required in school (for secondary schools only)**. The School will present the case at a case study meeting where key staff from HCA/NEECA and the School will meet to discuss strategies to support the pupil in school.  Funding to be agreed locally based on the needs of the pupil and HCA/NEECA capacity. |

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| Section 5 - ATTAINMENT DATA | | | |
| **KS2 SATS Results/Reported NC Levels:**   |  |  | | --- | --- | | English: |  | | Maths: |  | | Science: |  | | **Standardised Score:**   |  |  | | --- | --- | | Reading: |  | | Grammar: |  | | Maths: |  | | **FFT:**   |  |  | | --- | --- | | English |  | | Maths |  | | Science |  | | **CATS:**  Verbal Reasoning SAS:  Quantitative SAS:  Non Verbal Reasoning SAS: |
| Are these TA or Test Results?  Please indicate:  TA  **☐** Test Results ☐ |  |
| **KS3 Current APS Scores:**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **English:** |  | **Maths:** |  | **Science:** |  | | | | |
| **KS4 Qualifications and Accreditations Already Gained or Working Towards:** (including GCSEs already sat, BTECs awarded/working towards, exam dates and awarding bodies, details of controlled assessments etc):     |  |  |  | | --- | --- | --- | | **Qualifications/Accreditations Already Gained** | **Date** | **Awarding Body** | |  |  |  | |  |  |  | |  |  |  | |  |  |  | |  |  |  |   **For KS4 students or those working towards end of KS4 qualifications please indicate:**  Predicted outcomes. Please list **all** subjects and **current** predicted grades.   |  |  |  |  | | --- | --- | --- | --- | | **Subject** | **Target APS Score** | **Current APS Score** | **Any Units Completed** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  |   Do they already have **Exam Concessions**? No ☐  If yes, what are they? Click here to enter text.  Would you apply for **Exam Concessions**? No ☐  If yes, what might they be? Click here to enter text. | | | |

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| **LEVELS LADDER** |
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| **Legacy (Old) National Curriculum Level** | **Legacy (Old) GCSE Grade** | **Average Point Score** | **New Levels** | **Functional Skills** | **BTEC Equivalents** |
| P8 | U | **6** | **0.0** | Fail | Not yet Achieved |
| 1a | **7** | **0.1** |
| **8** | **0.2** |
| 1b | **9** | **0.3** |
| **10** | **0.4** |
| 1c | **11** | **0.5** | Working towards Entry Level |
| **12** | **0.6** |
| 2c | **13** | **0.7** |
| **14** | **0.8** |
| 2b | **15** | **0.9** |
| G- | **16** | **1.0** | Level 1 Pass | Entry Level |
| 2a | **17** | **1.1** |
| G | **18** | **1.2** |
| 3c | **19** | **1.3** |
| G+ | **20** | **1.4** |
| 3b | **21** | **1.5** |
| F- | **22** | **1.6** | Working towards Level 1 Pass |
| 3a | **23** | **1.7** |
| F | **24** | **1.8** |
| 4c | **25** | **1.9** |
| F+ | **26** | **2.1** |
| 4b | **27** | **2.2** |
| E- | **28** | **2.3** | Level 1 Pass |
| 4a | **29** | **2.4** |
| E | **30** | **2.6** |
| 5c | **31** | **2.7** |
| E+ | **32** | **2.8** |
| 5b | **33** | **3.0** |
| D- | **34** | **3.1** |
| 5a | **35** | **3.3** |
| D | **36** | **3.4** | Level 1 Merit |
| 6c | **37** | **3.5** |
| D+ | **38** | **3.7** |
| 6b | **39** | **3.9** |
| C- | **40** | **4.0** |  | Working towards Level 2 Pass |
| 6a | **41** | **4.2** |  |
| C | **42** | **4.4** |  |
| 7c | **43** | **4.6** |  |
| C+ | **44** | **4.9** |  | Level 2 Pass |
| 7b | **45** | **5.1** | Level 2 Pass |
| B- | **46** | **5.3** |
| 7a | **47** | **5.6** |
| B | **48** | **5.9** | Level 2 Merit |
| 8c | **49** | **6.2** |
| B+ | **50** | **6.5** |
| 8b | **51** | **6.7** |
| A- | **52** | **7.0** |
| 8a | **53** | **7.3** |
| A | **54** | **7.7** | Level 2 Distinction |
| 9c | **55** | **8.0** |
| A+ | **56** | **8.3** |  |
| 9b | **57** | **8.6** |  |
| A\* | **58** | **8.9** |  | Level 2 Distinction\* |
| 9a | A\*\* | **59** | **9.0** |  |

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| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Section 6 - INVOLVEMENT OF OTHER AGENCIES Please indicate which agencies are currently or have been known to have worked with the young person and bring a copy of any reports to the Panel Meeting. | | | | | | **Agency** | **Involved**  **Y/N** | **Date of involvement and most recent contact** | **Contact Name and Number** | |  |  |  |  | |  |  |  |  |  Section 7 - SCHOOL’S VIEW This section should provide the prospective educational provision with an overview of the young person’s skills, needs and future goals. | | |
| **Has the school identified a preferred learning style? YES** ☐ **NO** ☐(if yes give details): | | |
|  | **Subject(s):** | **Reason:** |
| **Most Successful** |  |  |
|  |  |
| **Least Successful** |  |  |
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| **Strategies / Interventions:** | **Date of Intervention** | **Successful Outcome?** | | **Reason** |
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| **Barriers to Learning:** | | | | |
| **Success Criteria:** | | | **Evidence required by school that targets have been met:** | |
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| Section 8 - PROGRESSION PLAN | | |
| *What progression does the school feel is attainable for this student, including any relevant qualifications* | | |
| **Short term:** | **Medium term:** | **Long term:** |
| **What needs to be done to support the young person to achieve learning/career aims:** | | |
| **What services now need to be used to underpin support?** | | |

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| Section 9 - LEARNING PROFILE **Young Person’s View: This section could not be completed as the student was self isolating as brother had presented with signs and symptoms of Covid**  This section provides you with the opportunity to describe how you like to learn, help us understand your strengths and weaknesses and will provide a basis from which to build your personalised learning plan. | | | |
| **What have your targets been this year?** | | | |
| **What is your preferred learning style?** | | | |
| **Please indicate in the boxes below the statements that best describe you**. | | |  |
| ☐ I always do things one step at a time  ☐ I know myself well and understand why I behave as I do  ☐ I enjoy community activities and social events  ☐ I learn well from talking and listening to others  ☐ I enjoy puzzles, crosswords and logical problems  ☐ Charts, diagrams and visual displays are important to my learning  ☐ I enjoy practical activities | ☐  ☐  ☐  ☐  ☐  ☐  ☐ | I learn best when I have to do it for myself  I like privacy and quiet for working and thinking  I enjoy and value taking written notes  I work well in a team  I get restless easily  I enjoy working or learning independently  I work well with numbers/mathematical problems |
| **Which subjects do you enjoy most?** | | | |
| **In which subjects do you have most success?** | | | |
| **What prevents you from learning?** | | | |
| **What do you find difficult about school?** | | | |
| **Do you get support? Yes** ☐ **No**  ☐  **What sort of support is most helpful to you?** | | | |

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| Section 10 - ASPIRATIONAL PROFILE | |
| **I would describe myself as** | |
| **Other people would describe me as** | |
| **Outside school I like to** | |
| **My feeling about moving to a new educational provider is** | |
| **I hope that my new educational provider will help me** | |
| **When I leave education I would like to** | |
| **PARENTAL CONSENT** | |
| **Parent/Carer View of Referral:** | |
| I understand and support this application for a change in educational provision. I have discussed this referral with the school. I consent to the information included in this referral being shared with educational providers. | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Parent/Carer Signature**    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Full Name (please print)**: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Relationship to Young Person:**    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** |

### Checklist for Positive Referral:

* Information Passport to be fully completed
* Information Passport to be signed by Referring School
* Positive Referral to be discussed with parent and student and signed consent given and sent through.
* Individual Risk Assessment to be completed
* Attendance Data for past 2 academic years
* Behaviour Log/Report
* School Report
* Up to date PSP, IEP, PEP, etc.
* A Copy of EHCP ( if applicable)
* Educational Psychologist Reports
* If the referral is for a Level One - One Off Incident as an alternative to a Permanent Exclusion all statements and reports to be provided as per a Permanent Exclusion.
* Any further information that would support the Positive Referral.

**Referrals will not be considered until this form is completed fully, signed parental consent has been obtained and the required evidence has been received at** [**admissions@kcat.co.uk**](mailto:admissions@kcat.co.uk)**. Upon receipt of this referral an acknowledgement email will be sent.**