

## Request for Paving the Way Service

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| Name of pupil: |  |
| Year/Class Name: |  |
| Date of Birth: |  |
| Age: |  |
| Ethnicity: |  |
| Home Language: |  |
| Unique Pupil Number: |  |
| Pupil Address: |  |
| Parent/Carer Contact Number: |  |
| Parent/Carer Email Address: |  |
| GP Address: |  |

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| School: |  |
| School Address: |  |
| Name of School Contact: |  |
| Job Title: |  |
| Email:  |  |
| Contact number: |  |
| Date of referral: |  |

**Pupil and school information:**

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| CLA (Child Looked After) | Yes/No |
| PP (Pupil Premium) | Yes/No |
| CIN (Child in Need) | Yes/No |
| CP (Child Protection Plan) | Yes/No |
| Other Family Intervention | Yes/No |

**Please Specify:**

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| Does this child have a disability or diagnosis?Yes/No? | If yes, please specify: |
| Is there an EHAT currently open for this child?Yes/No? |  |
| Stage of SEN Code of Practice (where appropriate) |  |
| Has an EHCNA application been made? | If yes, please specify |

**School Information:**

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| Briefly provide a description of the behaviours to warrant a referral: (Please describe the indicators around the criteria) |
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| Briefly describe the actions taken by the school to support the need(s), and the impact so far: |
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| What are you hoping the outcomes from the requested support to be? |
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| **Criteria** (please tick which options apply) |
| Social Communication |
| Attention and concentration |
| Anxiety |
| Emotional Regulation |

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| Details of other agency involvement, past and present. (For example EP,SALT,OT,EAL,FAMILY SUPPORT,CAMHS, Child and Family services). Please provide the dates and outcomes of any previous agency involvement:(Once the referral has been reviewed, you will be contacted to provide the reports of previous agency involvement before the referral is accepted onto the waiting list). |  |  |  |
| Agency details and contact | Date started | Date ended | Comments/Outcomes |
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| Has the child received any fixed term suspensions in the past 3 months? (If yes please provide details of how many incidents) |
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| Signed (by school): |  |

**Parent/Carer Information:**

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| Comment from parent/carer: (Please note, where appropriate, reports may be shared with other professionals) |  |
| Has the parent/carer attended any parenting groups? | If yes, please specify: |
| By signing this referral form you are agreeing to consent to information sharing between agencies | Parent/Carer signature and full name |

Please send referrals to:

Email: **earlyintervention@cognus.org.uk**

Address: Paving the Way, Cognus Limited, Cantium House, Railway Approach, Wallington SM6 0DZ

Telephone Number: 0208 323 0450

You will be notified by email of your allocated panel slot and link to join.

Please note: if any parts of the referral form are incomplete this will not be accepted and will be returned to the referrer.





**Cognus Paving The Way Partnership Agreement**

Commissioned Work

Cognus Paving the Way for ­­­­­­­Academic year 2022 – 23

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| **Main Focus of Support:** | The Paving the Way Service will offer an early intervention service, providing support to children and families where children have social communication, attention, and anxiety difficulties.   |
| **Support could include: (highlight support required)** | * 121 support with a student
* Group support where appropriate
* Advice for parents
* Advice for teaching staff
* Student observations and advice
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| **Areas of need** | Difficulties may include: * Social communication that may be associated with autism.
* Attention and concentration (that may be undiagnosed).
* Anxiety and self-esteem issues .
* Relationship/peer issues.
* Emotional regulation difficulties.
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| Expectations of Cognus Paving the Way | * Punctual attendance on set dates
* Clear communication over any changes
* Electronic records to be kept by Cognus Paving the Way and uploaded onto our secure system
* Safeguarding concerns shared with school
* Cognus Paving the Way will provide reports on outcomes
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| Expectations of School: | * Provide a quiet room for uninterrupted work/meeting
* Session times and dates to be organised with teachers and pupils in advance and pupils to be supported to attend
* Information about sessions occurring and areas of focus to be shared with parents in advance/permission granted
* School and parents will return reports and screeners within two weeks
* Protected time as perceived to be necessary for liaison between the SENCo, teacher and Paving the Way staff
* If pupils are absent/unavailable, Cognus staff to be informed in good time.
* NB on pupil/parent(s)absence: Depending on the reason for absence, Cognus staff will be able to offer an alternative on one occasion and if absence occurs more than once there will be a review of the suitability of the referral.
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