

Progressions Team, LLSC, Floor 9 – North Wing, Moorfoot Building, Sheffield, S1 4PL Tel: 0114 2296133 or 0114 2296185 Email: ect@sheffield.gov.uk

## Alternative Provision Referral Process & Form for KS3 & KS4 straight AP

It is important that the following procedures are undertaken in the correct order. Failure to do so may result in delays and possibly in a learner being turned down.

- School to complete and return the referral form to Progressions Team, ensuring that all sections are completed fully and accurately. The Parental/carer consent must be signed. Referral forms are downloadable from our Lifelong Learning website - <u>http://www.lifelonglearningandskills.org/our-facilities/14-25-progressions-team/14-16-alternative-provision</u>
- Progressions Team will log your referral onto the database and check requested provision for suitability and availability. We will then forward the referral to relevant provider(s) - this normally takes 3 working days. However, more complex cases may need to be given greater consideration, and this might take longer.
- 3. School to arrange preliminary visit(s) to provider(s). Visits <u>must</u> be accompanied by school; parent/carer and other professionals are also welcome to attend.
- 4. School to inform the Progressions Team of the outcome of the visit. If all parties are in agreement that the placement is appropriate, the Progressions Team will allocate a start date and add the learner on to the on-line register again within 3 working days.
- 5. Progressions Team will send out an email confirmation of start date; start/finish times of provision etc. School should inform student and parent/carer of the confirmed start date.

If you have any questions about the referral form process or you want to speak to a member of the Progressions Team, visit the downloads section of our website and click on the **Placement Support Officer Links to Schools** document to find their contact details.

At the end of this referral form, you will find a helpful checklist for you to keep. There is no need to return this last page back to us.

## Alternative Provision Referral Form for KS3 &KS4 straight AP



If you are wanting KS2/KS3 & KS4 Intensive Re-engagement programmes, this is now available on a separate Referral Form which can be found in the downloads section of our Lifelong Learning website at <a href="http://www.lifelonglearningandskills.org/our-facilities/14-25-progressions-team/14-16-alternative-provision">http://www.lifelonglearningandskills.org/our-facilities/14-25-progressions-team/14-16-alternative-provision</a>

Please note; Max Number of days at Doncaster GTA is 1 day, attending either the Motor Vehicle or Construction course due to the demand, and if and where appropriate a second day may be offered.

Learner's Full Name		Chosen Name if different	
UPN			
Home Address			
Parent/Carer	Parent/Carer's Name 1:	Parent/Carer's Name 2	
Emergency			
Contact Numbers	Mob 1:	Mob 2:	
Learners Date of Birth		Year Group	
&			
Current Age			

#### **COURSES/ACTIVITES REQUESTED**

Please refer to the AP Directory – A guide to Sheffield's Alternative provision programme for full course details at in the downloads section of our website, which can be found at the top of this page.

Programme Type	(Please Tick)	Programme Type	Provider	(Please Tick)
KS3 & KS4 – AP (Y9-Y11)		KS4 - New Arrival Support	Endeavour	
			Training	

Providers	Activities	Start Date/days requested

This Referral Form has be	en proposed by		
Name		Job Title	
School/Service			
Telephone		Email address	
Signature		Date	
This Referral/Learning Pla	n has been agreed with		
Learner's Signature		Date	
*This request will not be	processed unless the Pare	ntal/Guardian Consent is r	eceived for entry onto
this scheme			

# PART 1: Learner information (please complete all boxes)

Any other Agency involvement w			
Organisation	(Please Tick)	Organisation	(Please Tick)
СҮТ		MAST	
YJS		CAMHS	
Social Care		Other	
*Please give details of other:			
Please describe any			
interventions, 1:1 work and any			
triggers that may affect the learner from engaging.			
Any additional attachments –			
Please specify			
Safeguarding concern?	*Any concerns	must be raised with schoo	<mark>l initially to the</mark>
		<mark>ad or any member of the s</mark>	chool safeguarding team
	YES/ NO Safeguarding L	and in school:	
	Direct telepho		
	Email:		
Any other comments			
For example:			
<ul> <li>if the learner has drug or</li> </ul>			
alcohol problems			
• if there are concerns about			
behaviour or honesty			
<ul> <li>if the learner is recently bereaved</li> </ul>			
<ul> <li>any other issues which may</li> </ul>			
affect this learner's			
progress at an off-site			
placement			

Attendance record	
Educational Needs?	My Plan or EHCP? YES/NO Please state which one here
	Wherever possible, please enclose copy of plan and any additional support currently in place
Is the learner a Looked After Child?	YES/ NO Name of designated teacher in school: Direct telephone: Email:
Is the learner a Young Carer? If yes please give details of any arrangements needed when the learner is attending off-site provision?	YES/ NO
Any medical conditions, if "Yes" please give details	YES/ NO

# **Consent Form for Alternative Provision Programme**

Learner's Full Name		Date of Birth	
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#### Information about the Alternative Provision Programme

Please read this Referral Form carefully. It will enable your child (or the person you have legal parental rights to) to take part in the Alternative Provision Programme.

As the school/other referral agency will have explained, AP is a programme to offer your child the opportunity to gain experience and develop skills outside of the school environment with carefully selected training providers.

The AP scheme is run by Sheffield City Council's 'Progressions Team', who will review the referral forms and find an appropriate training provider. All providers are required to ensure the health and safety and insurance requirements are met, but there will be times (for example breaks, lunchtimes, possibly travel to and from the placement) where your child is unsupervised. This also includes occasions where your child leaves the site before the normal finishing time. In such circumstances, every effort will be made to inform you.

## Please complete the following information:

Medical /allergy conditions	Vac / No
Any medical or allergy conditions a Provider would need to know about?	Yes / No
If "Yes" give details:	

	Contact 1	Contact 2
Name (please print)		
Relationship to learner		
Mobile number		
Landline		

Consent to access the Alternative Provision Programme		
understand that		
1) The information in this form will be held by the school (or other refer school's data protection protocols – <b>please consult the school for details timescales etc.</b>		•
2) The form will be sent to the Progressions Team at Sheffield City Coun store the form electronically until your child reaches the end of Y13. At thi deleted.	0	
3) The form will be shared with potential AP providers. All AP providers securely until your child reaches the end of Y11. At this time the form will		nformation
4) Other information regarding your child (eg attendance data; progress incident reports etc) will be collected by the Progressions Team and share occasionally other agencies as deemed appropriate.	• • •	
I <b>agree</b> for my child to take part in the Alternative Provision Programme a related learning activities out of school.	nd work-	Yes / No
I <b>agree</b> for my child to travel in a staff car or minibus, in a case of emerger related activity.	ncy or school	Yes / No
I have read and understood the conditions outlined above		
Name (in Block Capitals)		
Parent's or guardian's signature:	Date:	

#### How we will use your information

The information provided to us will be used to manage and facilitate the Alternative Provision scheme. Personal information will be processed to fulfil the purposes of the scheme in providing students with opportunities to obtain training to enhance their educational experience. Personal data is processed under contract to which you/your child are party through your application to this scheme and is processed to allow Sheffield City Council to meet our statutory requirement to provide alternative provision under Section 19(1) of the Education Act 1996.

#### How long we will keep your information

The information you provide will be kept until the young person reaches the end of Year 13.

### Who we will share your information with?

This will require information about your child contained in the attached referral form to be disclosed to the Progressions Team, as administrators of the scheme, and selected training providers to help support your child during the programme.

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The Progressions Team and the training provider will not disclose this information to any other party without your permission unless there is a legal requirement or duty for them to do so or if there is a risk of serious harm or threat to life.

Details of current training providers who are engaging with the scheme and providing support can be found on the Lifelong Learning website in our 2019-20 AP Directory at <a href="http://www.lifelonglearningandskills.org/our-facilities/14-25-progressions-team/14-16-alternative-provision">http://www.lifelonglearningandskills.org/our-facilities/14-25-progressions-team/14-16-alternative-provision</a>

We will ensure that only the minimum information is shared to meet the requirements of the programme and relevant learning outcomes.

## What are your rights?

You/ your child have a series rights under Data Protection law. For further details about these rights, the contact details of our Data Protection Officer and the right to make a complaint, please see our Data Protection web page: <u>https://www.sheffield.gov.uk/privacy</u>

#### Photographs, videos & other images

Occasionally, we may take photographs of the learners on the Alternative Provision Programme. We may use these images in our prospectus or in other printed publications that we produce, as well as on our website. We may also make video/DVD or webcam recordings for conferences, monitoring or other educational use. We consider that such use is within the Council's legitimate interests in promoting and informing the public and participants in the activities under the programme.

From time to time, our settings may be visited by the media who may take photographs or film footage of a high-profile event. Pupils will often appear in these images, which may appear in local or national newspapers, or on televised news programmes. Pupils will be provided with the opportunity to highlight to the media or relevant staff if they do not wish to be captured in such activity.

We do note that images on websites can be viewed throughout the world and not just in the United Kingdom and that some overseas countries may not provide the same level of protection to the rights of individuals as EU/UK legislation provides. Some images may be kept permanently once they are published and be kept as an archive of the programme.

#### Social Media

Some Providers may use social media to advertise and promote their organisation. Please ensure that you have read and understood the providers Online Safety policy which covers the requirements for safe ICT use, including using appropriate devices, safe use of social media websites and the supervision of pupils within the classroom and other working spaces.

Should you wish to discuss the use of your child's image you should contact: ect@sheffield.gov.uk

To ensure that your referral is processed without delay please ensure you have completed the following:

	Checklist	Completed
1	Completed learner details including DOB and Year Group	Yes/No
2	Course Requested - ensure you have consulted with the brochure for times and	Yes/No
	days the courses are running - download our brochure at	
	http://www.lifelonglearningandskills.org/our-facilities/14-25-progressions-	
	team/14-16-alternative-provision	
3	Signature – the referring school contact details and signature	Yes/No
4	Any Other Agency involvement – to ensure a seamless coherent service	Yes/No
5	Why you are wanting this learner to access Intensive Re-engagement?	
	Objectives	Yes/No
	Interventions	Yes/No
	Triggers/barriers?	Yes/No
	Any other additional information	Yes/No
6	Identifying Vulnerable Young People	
	Safeguarding	Yes/No
	EHCP - enclose a copy with the referral if you can	Yes/No
	Looked After Child	Yes/No
	Young Carer	Yes/No
7	Medical Conditions	Yes/No
	Is a Risk Assessment Required?	Yes/No
8	Consent Form – parent/carer's signatures and up-to-date emergency contact details	Yes/No
	N.B This referral request cannot be processed unless the Parental Consent is received for entry onto the scheme.	

## Completed forms should be sent to:

1. Via Anycomms Plus – <u>https://anycommssheffield.avcosystems.com/login.aspx</u>

upload to the Local Authority; File Type is Alternative Provision; Service is Progressions Team

2. Via Email: Please send completed forms for the attention of your named Placement Support Officer to <a href="https://www.ec.eouto.com">ECT@sheffield.gov.uk</a>

Please contact us if you require an account creating on 07833480545