**Referring a pupil to CENMAC?**

**Want to make the process run smoothly? Read on!**

* Permission must be sought from the pupil’s home LA for funding before CENMAC can assess a pupil so think of this as a “grant” application – give as much information as you can. It will help the LA make a decision and CENMAC to arrive at the assessment well informed.
* Your completed form is sent to the LA as part of the request for funding so what you say is important.
* Please explain the difficulties the pupil is having and let us know what has already been tried.
* Don’t state that a specific piece of equipment is required! If you offer the solution the LA is unlikely to fund a request for CENMAC’s support and advice. Remember CENMAC is an advice and support service (NOT just a loan library!).
* Complete the form as fully as possible. **It is NOT acceptable to answer “N/A” or leave blank the question on page 2 regarding physical difficulties.**
* Make sure that the supporting information requested (handwriting/drawing sample, IEP, OT, SALT, VI, or HI reports as applicable) are included with the form. If any of the above are inappropriate please say so on the form.
* Return the original form by post – a faxed copy often makes an illegible photocopy to send to the LA.
* Make sure that the correct postage is put on!  *Insufficient postage leads to delays and a surcharge is levied by the post office.*
* Ensure that it is signed by your Headteacher.
* Ensure that the Ethnic Background Monitoring Information sheet is completed.

Once permission to assess has been obtained, the Advisory Teacher will contact school and arrange an appointment to carry out the assessment. **Any adult working with the pupil is welcome to attend the assessment.**

***If you have any questions about the referral you wish to make or the referral procedure please do not hesitate to contact CENMAC on 020 8854 1019 or*** ***mail@cenmac.com******.***

|  |
| --- |
| **Ethnic Monitoring** |
| We are now obliged to record the ethnic background of pupils supported by CENMAC and the following information must be completed before we can process the application. **This information should already have been given to school by the parent or child and be held on your records.** This page will be detached from the remainder of the form before being passed to the LA to seek their agreement to funding. |
|  |
| Please tick one box only to indicate the ethnic background of the pupil or child named below. Please also tick whether the form was filled in by a parent, pupil or school. |
|  |
| **Pupil’s Name:**  |
| **White**British [ ] Irish [ ] Traveller of Irish Heritage [ ] Gypsy/Roma [ ] Any other White background [ ]**Mixed** White and Black Caribbean [ ] White and Black African [ ] White and Asian [ ] Any other mixed background [ ]**Asian or Asian British**Indian [ ] Pakistani [ ] Bangladeshi [ ] Any other Asian background [ ]**Black or Black British**Caribbean [ ] African [ ] Any other Black background [ ]**Chinese** [ ]**Any other ethnic background** [ ]**I do not wish an ethnic background category to be recorded** [ ] |
| This information was provided by:**Parent** [ ] **Pupil** [ ] **School** from information given by the parent/pupil [ ] |

 **CENMAC**

Request for Advice

sent to School on

03.04.2017

# REQUEST FOR ADVICE ON COMMUNICATION DIFFICULTIES

A request has been made to CENMAC to carry out an assessment on the following pupil. **This is a general form – please fill in as many details as possible.**  It will help us with our assessment.

The pupil’s parent(s)/carer(s) must be informed of this referral and that an assessment may take place; all involved professionals should be made aware of this referral.

**Please return the ORIGINAL form not a photocopy**

When returning this form please include the following:

* A copy of the pupil’s Individual Education Programme (IEP)
* A copy of the Occupational Therapist’s and/or Speech & Language Therapist’s report if available
* A copy of any Hearing or Visual impairment reports if appropriate
* An example of how the pupil currently records text (handwriting/drawing) indicating whether from copy or free writing and approximate time taken

**Please note** This form should be completed as fully as possible as it forms part of the request to the LA for funding for the assessment.

|  |  |  |  |
| --- | --- | --- | --- |
| Pupil’s Name | Gender | **DOB** | **Year (N-13)** |
|  | M / F |  |  |
| Home Address |  |
| Postcode |  | Tel No |  |
| Parent/Carer |  |
| Home Borough |  | Does the pupil have a Statement/EHCP? |
| Registered Disabled? If yes please give registration no: |
|  |  |  |  |
| **School** |  |
| Address inc Postcode |  |
| LA |  | e-mail |  |
| Tel No |  | Fax No |  |
| Contact/SENCO |  |

|  |  |  |
| --- | --- | --- |
| **Health and Safety** |  |  |
| Are there are any Health and Safety issues that we should be aware of? *For example are you aware of any infectious diseases that may be harmful to a pregnant woman?* |
|  |

|  |
| --- |
| Other agencies involved? |
| Agency |  |
| Contact Name |  | Email/Tel No |  |
| Agency |  |  |  |
| Contact Name |  | Email/Tel No |  |
| Agency |  |
| Contact Name |  | Email/Tel No |  |
| Copies of any reports which state that this pupil has handwriting difficulties due to a **physical disability** should be included with this application |
|  |
| Has the pupil a **Statement** of SEN / **EHCP**? |
| Has the pupil been, or will the pupil be, assessed for writing aids/access devices at any other centre.If so, where and when? |
| Give details of the pupil’s physical or neurological impairment and how it affects their school day with particular regard to written communication |
| Does the pupil use a wheelchair to move around school? |
| What support is already in place to follow up the recommendations following this assessment? |
| Written Communication |
| If the pupil needs to use a computer/keyboard for writing, do they have any problems with access? Please describe how they access the keyboard e.g. one or more fingers |
| If the pupil needs to use a switch tell us what access the pupil has already tried |
| What software is the pupil using? |
| What software has already been tried? |
|  |
| Alternative Access |
| Describe how the pupil currently indicates his/her needs? (Tick whichever applies)Through speech:Through signing:Through a communication board/book: Picture: Symbol: Word:Give a short description |
| Does the pupil use a speech aid? (If so please name this) |
| Who co-ordinates his/her present communication systems? |
| How does the pupil indicate: ‘Yes’ ‘No’ |
| Other Information |
| What are the pupil’s latest achievement levels – National Curriculum or P levels? *Please add any other statistics that may be relevant.*Please include any evidence of work done so far that would support this referral |
| Which computers, peripherals, switch and other low-tech aids are being used in the school already? |
| What would you and any other professionals and the parents like to see come out of this assessment? |
| Any other information you feel is relevant |
|  |
| **Headteacher’s Name** |  |
| Signature |  |
| Date |  |
|  |
| **When you have completed this form please return it, with supporting evidence, to:** |
| Support Services ManagerCENMACCharlton Park AcademyCharlton Park RoadLondonSE7 8JB | **You can contact CENMAC on:**Tel: 020 8854 1019Fax: 020 8854 1143e-mail: mail@cenmac.com |

**This application form is by no means conclusive.** It is designed to give us a general picture of the pupil you have referred to CENMAC.