**YOUNG PERSONS REQUEST FOR THE LOCAL AUTHORITY (LA)**

**TO CONSIDER A STATUTORY ASSESSMENT OF**

**SPECIAL EDUCATIONAL NEEDS (SEN)**

**UNDER THE CHILDREN AND FAMILIES ACT 2014**

“In considering whether an EHC needs assessment is necessary, the local authority should consider whether there is evidence that despite the early years provider, school or post-16 institution having taken relevant and purposeful action to identify, assess and meet the special educational needs of the child or young person, the child or young person has not made expected progress…”

 [SEND code of practice 2015, Sections 9.14]

**All Schools and Colleges have a support team to help students. They can give you lots of support without you having to have an Education, Health and Care (EHC) Plan. They must do as much as they can to make sure you get the support you need to reach your goals. If you need more help than the support team can give you and your school or college has already given you lots of help and tried everything they can to support you, but it is still not enough, you may want to ask for an assessment to see if you need an EHC Plan.**

**This form is for young people aged 16 and over.**

**Please complete this form using black ink, as this is easier to photocopy.**

**After you have completed this form, collected and attached copies of all relevant evidence you wish to include in your request, and have also
attached a copy of your child / young person’s views, you can submit it to the Local Authority in any of the following ways:**

|  |  |
| --- | --- |
| **By Email:**  | ehcp@torbay.gov.uk (please send scanned copies to include your signature) |
| **By Post:** | SEND Team2nd Floor (Room SF 332)Electric House, Torbay Councilc/o Torquay Town HallCaste Circus, Torquay,TQ1 3DR | **In Person:** | Taking it into the Children’s Services Office in Castle Circus, Torquay  |

**SECTION 1 – Your Details**

|  |  |
| --- | --- |
| Your Surname  |  |
| Other names |  |
| Date of Birth |  | School Year Group |  |
| Gender at birthe.g. Boy/Girl |  | Gender identity if different to birth |  |
| Your Address  |  |
| Home Language |  | Religion |  |
| Telephone number(s) | Home |  |
| Mobile |  |
| Other  |  |
| Email  |  |
| **Accessibility and Preferred Method of Contact** |
| Do you have any specific communication and/or accessibility needs?If yes please describe e.g. size of text, language interpreter or access arrangements for meetings | Yes / No  |
| Our current most frequent methods of contact include:* Email with attached electronic versions of documents if required)
* Post via Royal Mail
* Phone call
 |
| Preferred method/s of communication | Email (with attached electronic versions of documents if required) | Yes / No |
| Post via Royal Mail | Yes / No |
| Phone call | Yes / No |
| Please can you confirm your primary phone number |  |
| Please can you confirm if you are happy for us to leave voicemail. | Yes / No |
| Text  | Yes / No |
| Virtual meetings via Microsoft Teams | Yes / No |
| Face to face meetings | Yes / No |
| **Please note that it is your responsibility to inform us if any of your contact details or preferred methods of communication change.** |
| School or College currently attended |  |

**ETHNICITY (optional)** – please indicate your ethnic origin:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Indian |  | Caribbean |  | White British |  |
| Pakistani  |  | White and Black Caribbean |  | White Irish  |  |
| Bangladeshi  |  | African |  | Any other White background  |  |
| White and Asian background |  | White and Black African |  | Any other ethnic group |  |
| Chinese  |  | Any other Black background |  | Any other mixed background |  |
| Any other Asian Background  |  |  |  |  |  |

SECTION 2 – Other services/people involved with you

|  |  |  |  |
| --- | --- | --- | --- |
| **EDUCATION** | **Involved Yes/No** | **Report included** | **Name & Contact Details** |
| Educational Psychology Service |  |  |  |
| Early Years Inclusion Advisory Teachers |  |  |  |
| Hearing Impaired / Visual Impaired Service |  |  |  |
| Outreach Services   |  |  |  |
| Attendance Officer  |  |  |  |
| Other education service or person |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **SOCIAL CARE** | **Involved Yes/No** | **Report included** | **Name & Contact Details** |
| Early Help – family support services |  |  |  |
| Child in Need – social worker |  |  |  |
| Children with Disabilities Team – social worker |  |  |  |
| Youth Offending Team |  |  |  |
| Other social care service or person |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **HEALTH**  | **Involved Yes/No** | **Report included** | **Name & Contact Details**  |
| Speech and Language Therapy |  |  |  |
| Paediatrician |  |  |  |
| Occupational Therapy |  |  |  |
| Physiotherapy |  |  |  |
| Child and Family Guidance / CAMHS |  |  |  |
| Other Health service or person |  |  |  |

## SECTION 3 – More About You

**All Schools and colleges have a support team to help students, without the need for an Education, Health and Care (EHC) plan. The Code of Practice for Special Educational Needs, requires that the Local Authority must seek to ascertain your views as part of the assessment.**

|  |
| --- |
| **How do you think having an EHC Plan would make sure you reach your goals?***(Think about: What support you need that you cannot get without having an EHC Plan)* |
| **What do people like about you:** *(Think about: What nice things people say about you?)* |
| **What can you do well?***(Think about: What do you think you are good at? What do you find easy?)* |
| **What is important to you now?** *(Think about: What college course, apprenticeship or qualifications you want? Which people are most important to you? What other things are you interested in?)* |
| **What is important to you for your future?**(*Think about: What type of job you want to have? Do you want live in your own place? Do you want to be able to drive? Have your own car? Do you want to be in a relationship? Do you want to have children?)* |
| **What is working well for you?** *(Think about: What you are happy with? Who gives you the most help?)*  |
| **What is not working well for you?***(Think about: What you find difficult? What you would like to do if you had the right support?)* |
| **How best to support you** *(Think about: How you prefer to communicate? (e.g. talking to people or using sign or symbols). What help might you need to make decisions? How you like to learn? (e.g. reading about things or doing more practical things yourself). How you like to get more information? What kind of support works best for you?)* |

|  |
| --- |
| **Additional Information** Is there anything else you want to tell us? Is there anyone else you would like us to contact as part of this process? |
|  |
| **If you are getting someone to help you with this request and you want them to be sent copies of the letters you will be sent, please put their details here** |
| Name of advocate or supporter |  |
| Their Contact Details: |
| Address  |  |
| Telephone number(s) | Home |  |
| Mobile |  |
| Other  |  |
| Email  |  |

## SECTION 4 – How we will use your information

**What information will we be processing?**

We will process personal information provided by you about you including names, addresses, contact details, dates of birth, identification reference numbers (e.g. Unique Pupil Number (UPN), NHS number etc.) and gender status. We may also need to hold some special category data including physical and mental health details in order to identify and meet individual needs. And, we may need special category data including: ethnic origin and religious and/or philosophical beliefs.

We will request and process personal information provided by other organisations and bodies including, but not limited to, Torbay Children’s Services, other social care services, education providers, healthcare providers and the police.

We are the data controller in relation to your data.

**Why will we be processing it?**

The Special Educational Needs and Disabilities Service (SEND) will use the data to identify your SEND needs and ensure that the required support is identified. It will be used to determine whether a Statutory Assessment is required and may help inform the outcome of this. [The SEND Code of Practice](https://www.gov.uk/government/publications/send-code-of-practice-0-to-25) explains who we **must** ask for advice when carrying out an EHC needs assessment. If appropriate the data will help to formulate, review and monitor your child’s progress against Education, Health and Care Plans (EHCPs).

Your information will allow us to improve the service for others through Quality Assurance. As part of our quality assurance process, we undertake regular auditing of EHCPs, Annual Reviews and amended Plans. This helps us to improve our service. Our auditing work is undertaken internally and externally, with colleagues such as Education, Health and the Community and Voluntary sector. All those who participate in the auditing process, will sign a confidentiality agreement.

The Special Educational Needs and Disabilities Service (SEND) use data for statutory returns. This data sharing underpins school funding, educational attainment policy and monitoring and enables Government to; produce statistics, assess our performance, determine the destinations of young people after they have left school or college and to evaluate Government funded programmes.

**What is our lawful basis?**

Our lawful basis for processing your personal and special category data is that is a task carried out in the public interest outlined in the General Data Protection Regulation as:

Article 6(1)(c) processing is necessary for compliance with a legal obligation to which the controller is subject

Article 6(1)(e) processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller;

Article 9(2)(g) processing is necessary for reasons of substantial public interest, on the basis of Union or Member State law which shall be proportionate to the aim pursued.

Article 9(h) processing is necessary for the purposes of the provision of health or social care or treatment or the management of health or social care systems and services

These laws being:

* Children Act 2004
* Children Act 1989
* Education Act 1996
* Care Act 2015
* Equality Act 2010
* Children and Families Act 2014
* The Special Educational Needs and Disability Regulations 2014
* Mental Capacity Act 2005
* The Education (Information About Individual Pupils) (England) Regulations 2013

At the beginning of the EHC assessment process we believe its good practice to gain consent for the sharing of this data, however this is not necessary to begin assessment.

Educational providers are covered under their own GDPR, privacy notices, policies and procedures.

**Do we share your information?**

If appropriate we may share your data with other organisations and bodies including, but not limited to, Torbay Children’s Services, other social care services, education providers, alternative provision, healthcare providers, Government departments and the police.

Information about you may be provided to us by other organisations and bodies including those listed above.

We do not trade personal data for any commercial purpose and we will only disclose your personal information if we have a lawful basis to do so.

Any information shared is done in accordance with our statutory duties under the above named legislation.

**How long do we keep your information?**

We are currently retaining records relating to children’s services indefinitely as required by the Independent Inquiry into Child Sexual Abuse (IICSA).

**What are my rights?**

Torbay Council’s Information Rights Policy is available upon request or can be found online at [www.torbay.gov.uk/council/information-and-data/data-protection/your-rights/](http://www.torbay.gov.uk/council/information-and-data/data-protection/your-rights/)

You are able to exercise your information rights at the above link.

Alternatively you can contact the Information Governance Team via email at infocompliance@torbay.gov.uk or write to:

Information Governance

Torbay Council, Town Hall

Castle Circus

Torquay

TQ1 3DR

**Declaration:**

I have checked that the details I have provided, including contact details, are correct and have read and understand the privacy information above.

When signing this declaration, you are also giving permission for your EHCP to be part of our quality assurance process. This may also involve direct contact with yourself and if appropriate your parents, to gain your thoughts.

Print name: ………………………………………………………………………….

Signed: ………………………………………………………………………

Date: ………………………………