



**REQUEST FOR SUPPORT 2025-2026**  
**KS 1 / 2 Outreach/Inreach**

1. This form should be completed by the school and signed by the Head teacher and parents/carers.
2. Please continue any entries on a separate sheet if necessary. You should attach all relevant reports including those where other agencies have been involved.

**Primary outreach referrals-** please return to [jfarley@icollege.org.uk](mailto:jfarley@icollege.org.uk)  
[rsilverthorne@icollege.org.uk](mailto:rsilverthorne@icollege.org.uk)

<b>Child's Surname</b>		<b>Other name(s)</b>	
<b>Names of Parents / Carers</b>			
<b>Date of Birth and school year</b>			
<b>Contact Number(s)</b>			
<b>Home Address</b>			
<b>School and contact phone number</b>			
<b>Please indicate who will be the main liaison contact at the school, for discussion of this student's targets and educational plan.</b>			

<b>Other Schools attended in last eighteen months</b>							
<b>Name(s) of any other multi-agency workers, including contact numbers and email who have supported the family or school and from whom copies of reports can be obtained</b>	<b>Agency</b>			<b>Contact Name and Details</b>			
<b>Is the pupil currently attending school, if NO please indicate why.</b>		Yes		No		Reasons	
<b>SEN Information – select appropriate</b>	<b>Statement (S)</b>		<b>Education, Health &amp; Care Plan (E)</b>				<b>SEN Support (K)</b>
<b>Please indicate type of need</b>  <b>Primary (1)</b> <b>Secondary (2)</b>	<b>Communication and Interaction</b>						
	<b>Cognition and Learning,</b>						
	<b>Social, Emotional and mental health difficulty</b>						
	<b>Sensory and/or physical needs</b>						
<b>Details of any relevant medical information known to the school.</b>							

Please summarise the difficulties that have led to this referral, providing clear, recorded evidence on a separate sheet if required.

From the list below, please identify support / agencies involved AND attach reports for boxes ticked.

PLEASE COMPLETE <u>FULLY</u> (tick)		ADDITIONAL INFORMATION
IEP/SAP Targets		
PSP/behaviour		
Medical Issues		
Disability		
Attendance Issues		
Statements of Special Educational Need Report / EHC Plan		
KS2 results – teacher assessment & tests		
Individual Risk Assessment ( blank sent to you)		
PEP/LAC report		
EBD scale (blank sent to you)		
Learning Style		

<b>Student's UPN</b>		
<b>Pupil Premium</b> <i>(please indicate type i.e. FSM/ LAC/ Ever6)</i>		
<b>% attendance for 12 week period prior to support request</b> <i>(not academic year)</i>		
<b>Number of days previous excluded in the same 12 week period prior to the date of this form</b>		
<b>Current levels/grades for English, Maths and Science</b>		
<b>Last school report</b> <i>(attach please)</i>		
<b>Please attach any other recent reading, spelling and maths assessments</b> <i>(indicate if there is a time frame when this should not be repeated).</i>		
<b>Any relevant family information</b>		

**What has been tried within the school's resources to meet the pupils' needs?**

**Please indicate the areas in which you require the additional support from a Pupil Referral Unit:**

**Please give an indication of the student's strengths and interests:**

**Please give a brief indication of the parental / carer views about the involvement of staff from a Unit:**

**Please give a brief indication of the pupil's views about the involvement of staff from a Unit:**

**Signed**

**Dated**

**Head teacher**



**Parent/carer**





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<b>Risk Assessment and actions by:</b>	<b>Name/Role:</b>		<b>Signature:</b>	
<b>EVC, Health and safety Advisor:</b>	<b>Name/Role:</b>		<b>Signature:</b>	
<b>Authorised by:</b>	<b>Name/Role:</b>		<b>Signature:</b>	
If any action is noted that requires specialist training, please ensure you have the right qualifications or employ an instructor. Please sign to confirm.			<b>Signature:</b>	
<b>Review Date:</b>	<b>Assessor, signature:</b>	<b>EVC, Health and Safety Advisor, signature:</b>	<b>Authorised by, signature:</b>	




**Notes:**

- Authorisers will be Heads of Service, Heads of School Department or Head Teachers.
- Risk Assessment reviews to be carried out after any associated 'Riddor' accident or at least annually.



**RISK = SEVERITY OF HAZARD X LIKELIHOOD OF OCCURANCE**

**Severity can be measured on a 4-point scale:**

1. No injury
2. Minor injury: May need some first aid assistance - not life threatening but of a minor nature e.g. nose bleed, minor bruises, sprains etc.
3. Major injury: Any fracture other than to fingers, thumbs or toes. Any dislocation. Loss of sight. Any injury or incident leading to hypothermia, unconsciousness, requiring resuscitation or requiring admission to hospital.
4. Fatal

**Likelihood can be measured on a 5-point scale:**

1. Improbable: so unlikely that probability is close to zero.
2. Remote: unlikely, but conceivable.
3. Possible: could occur sometime
4. Probable: not surprised will occur several times
5. Likely: occurs repeatedly / event only to be expected.

Multiplying Severity x Likelihood gives a number between 1 and 20. The person completing the risk assessment then has a relative scale of risks on which to base protective measures to reduce the overall risk as close as possible to 1.



**Risk can be categorised in the following way:**

1-5	low risk
6-10	medium risk
11-15	high risk
16-20	unacceptable risk

- Low risk: [1-5] The possibility and nature of an accident occurring are not substantially different to those occurring in every day experience.
- Medium risk: [6-10] The hazards encountered are outside the groups' experience but by adopting principles of good practice it should bring them to an acceptable level.
- High risk: [11-15] The hazards encountered are beyond the every day experience of the group. The repercussions of an accident could lead to serious consequences.
- Unacceptable risk: [16-20] The hazards encountered are far beyond the experience of the group and the party leader. The visit should not go ahead

**TBB Disaffection Matrix.**

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

<b>Summary Chart section 1. Emotional and social behaviour. Extent of staffs' concern.</b>	<b>RAG rate according to key below</b>
Sexualised gestures	
Sexualised language	
Abusive language	
Verbally threaten other pupil	
Verbally threaten staff	
Directed abuse to staff	
Racism	
Homophobia	
Drug related conversations	
Uses rude/ offensive language	
Talk of illegal activity	
Personal insults to students and visitors	
Physically threatens/harm pupils	
Physically threatens/harm teacher	
Shredding paper	
Destroying classroom equipment (pencil, ruler etc.)	
Destroying books/magazines	

Destroying displays	
Drawing on walls doors and tables	
Throwing with intent	
Refusing to follow instructions	
Kicking doors	
Slamming doors	
Walking out of class	
Walking off site	
Not handing in belongings	
Taking responsibility for their actions	
Listening skills	
Not engaging with the group	
Attendance	

No cause for Concern	
Mild cause for Concern	
Serious cause for Concern	