

## Y7/8 Request for Support - Information

The KS3 enhanced provision at Moulsham Junior School works specifically with students in Year 7 or 8 across Mid Essex to support transition from Primary to Secondary. We aim to work supportively and co-operatively with the families and caregivers of the student, as well as the referring provision and any other agencies.

Each request is heard at a panel meeting which consists of representatives from the SEMH Enhanced Provisions, the local authority, local schools and other relevant services.

Requests will be considered at panel based on the following criteria:

- SEMH is the main area of need
- TPP is adopted as a whole-school approach
- High quality SEND support has been in place, including support from the SEND Inclusion Team
- The school is prepared to work in partnership and maintain their inclusion
- Parental consent is agreed
- Transport can be provided (for placements).

If you are confident that you can meet the above criteria, please continue to complete this Request for Support Form and send it to:

Jo Brown, Head of Provision – 07355 091632 - [Moulsham Enhanced Provision](#) or complete the request for support and send securely to [jbrown@moulsham-jun.essex.sch.uk](mailto:jbrown@moulsham-jun.essex.sch.uk)

Submission deadline dates	Panel dates
25 <sup>th</sup> September 2025	9 <sup>th</sup> October 2025
27 <sup>th</sup> November 2025	11 <sup>th</sup> December 2025
22 <sup>nd</sup> January 2026	5 <sup>th</sup> February 2026
26 <sup>th</sup> February 2026	12 <sup>th</sup> March 2026
30 <sup>th</sup> April 2026	14 <sup>th</sup> May 2026
18 <sup>th</sup> June 2026	2 <sup>nd</sup> July 2026

Further information about all SEMH Enhanced Provisions can be founds here:

[SEMh enhanced provision: SEMH enhanced provision | Essex Schools Infolink](#)

Please be aware of the following additional considerations that may influence panel decisions:

- Current cohort within the provision
- Provision capacity
- Other pupil needs which require further assessment.

## Request for Support

### Student Information

<b>Surname (legal)</b>	
<b>Surname (known as)</b>	
<b>Forename</b>	
<b>Date of Birth/Year Group</b>	
<b>Ethnicity/Gender</b>	
<b>UPN</b>	
<b>PPG</b>	Yes/No
<b>FSM</b>	Yes/No
<b>CiC</b>	Yes/No
<b>Attendance %</b>	<b>Please attach Attendance Report</b>
<b>Current Educational Provision</b>	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Alt Ed <input type="checkbox"/>
<b>SEND Needs</b>	<input type="checkbox"/> EHCP - Band _____ <input type="checkbox"/> EHCNA – Date requested _____ <input type="checkbox"/> SEN support <b>Please attach latest One Plan</b>
<b>SEND Area of Need</b>	
<b>Date of last meeting/next meeting</b>	
<b>Diagnosed conditions</b>	ADHD/ODD/ASD etc
<b>Key Stage 2 data (predicted/actual)</b>	Reading: Writing: Maths:

## Parent/Carer Information

Parent/Carer 1 – contact details

<b>Name</b>	
<b>Address</b>	
<b>Telephone Number</b>	
<b>Email</b>	

Parent/Carer 2 – contact details

<b>Name</b>	
<b>Address</b>	
<b>Telephone Number</b>	
<b>Email</b>	

## Family Information, Views and Consent

<b>Family Members</b>	
<b>Family circumstances</b>	
<b>Any other significant factors</b>	
<b>Transport arrangements confirmed with parents</b>	Yes/No
<b>Mode of transport</b>	Walk/ Cycle, Parent to drive, Bus/ Taxi funded by secondary school
<b>Student views</b>	
<b>Family views</b>	
<b>Signed</b>	
<b>Date</b>	

## Agency Involvement

Agency	Finish/start date	Key worker details	Outcome/Impact	Report Attached
Family Solutions				Yes/No
Attendance monitoring				Yes/No
Education Psychology				Yes/No
<b>Inclusion Partner</b> Please state if parental consent has been given or student was discussed anonymously				Yes/No
Health Services				Yes/No
Youth Offending team				Yes/No
Paediatrician/GP				Yes/No
CAMHS				Yes/No
MHST				Yes/No
Community Police				Yes/No
Power/Affinity Project				Yes/No
Education Access				Yes/No
Virtual School				Yes/No
Alternative Provision				Yes/No
Other (please specify)				Yes/No

## Child Protection/Safeguarding Information

<b>Social Care Involvement</b>	CIN/CP (delete as appropriate)
<b>Social Worker Name</b>	
<b>Telephone Number</b>	
<b>Email</b>	
<b>Date CIN/CP open</b>	
<b>Date of last meeting</b>	
<b>Date of next meeting</b>	
<b>Risks</b>	Y/N (please consider leaving site/physical aggression/attendance/home visits etc)

## Education Information

<b>Name of current school/provision</b>		
<b>TPP Status (please tick)</b>	Totally embedded	<input type="checkbox"/>
	Partially embedded	<input type="checkbox"/>
	Attended Train the Trainer	<input type="checkbox"/>
	Attended Elements 1 & 2	<input type="checkbox"/>
	Expressed interest	<input type="checkbox"/>
<b>If Y8, please state which school was attended in the previous academic year and give a brief history</b>		
<b>Referrer's name</b>		
<b>Role</b>		
<b>Email</b>		
<b>Telephone Number</b>		
<b>Is the school SENCo aware of this request?</b>	Yes/No	

## Supporting Information

<p><b>Support requested (please tick)</b> The outcome of the request will be one of the following:</p> <ul style="list-style-type: none"> <li>- Consultation, advice and signposting</li> <li>- Outreach support</li> <li>- A short-term, partnership placement in an SEMH Enhanced Provision.</li> </ul>	<p>Consultation, Advice &amp; Signposting <input type="checkbox"/></p> <p>Outreach Support <input type="checkbox"/></p> <p>A short-term, partnership placement <input type="checkbox"/></p>
<p><b>Reason for request for support</b> (Include which assessment tools have been used, and details of strengths, areas of need, family context, significant contributing factors)</p>	
<p><b>What support is currently in place?</b></p>	
<p><b>What is working well?</b></p>	
<p><b>What is not working?</b></p>	
<p><b>Desired Outcomes</b></p>	