**Educational Psychology Referral Checklist**

**Before completing a referral to The Educational Psychology Service using the Consultation Referral Form (CRF), Please consider how you would demonstrate the following;**

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| **Area of need** | | **✓** | **Additional Info** |
|  | |  |  |
| **General info** | | | |
| Has a meeting with parents been held to gain additional background info and explain the role of the EP? | |  |  |
| Have you identified the general needs of the pupil? | |  |  |
| Have you included the pupil’s Provision map/ IEP’s showing a plan do review cycle of at least two terms⃰ | |  |  |
| Have you observed evidence of appropriate differentiation happening in the classroom? | |  |  |
| Have you observed evidence of quality first teaching? ⃰ | |  |  |
| Have you attached examples of end of year reports? | |  |  |
| Is the child LAC? If yes have you attached recent PEP reports – please also include the name and contact details of the social worker | |  |  |
| Have you asked the staff to complete a round robin questionnaire outlining strengths and needs across different subjects (secondary school) | |  |  |
| Have you included contact details of other professionals involved and reports attached? | |  |  |
| **Cognition and Learning** | | | |
| Reading assessment Standard Score |  | |  |
| Spelling assessment standard score⃰ |  | |  |
| Any other attainment info – including CAT scores at secondary school ⃰ |  | |  |
| What evidence based interventions have been tried and what was the impact? ⃰ |  | |  |
| **Social, Emotional and Mental Health Difficulties** | | | |
| What standardised assessments have been used? Please include scores;  SDQ  BECK  Connors  Boxall Profile⃰ |  | |  |
| Evidence of additional provision put in place by the school (ELSA, Mentor etc) |  | |  |
| Has a referral to CAMHS been made?  Date of referral and by whom? |  | |  |
| What evidence based interventions have been tried/ for how long and what was the impact?⃰ |  | |  |

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| **Communication and interaction** | | |
| Has a referral to The Speech and Language therapy service been made? (If so please provide contact details and report if available) |  |  |
| **Sensory and Physical** | | |
| What adaptations have been made in the classroom/ school e.g movement breaks, fidget toys, |  |  |
| Are there any referrals to OT, Sensory Impairment Service? If so please provide contact details and reports if available |  |  |
| What evidence based interventions have been tried/ for how long and what was the impact? |  |  |
| **Independence and self help** | | |
| What adaptations have been made in the classroom/ school e.g movement breaks, fidget toys, |  |  |

**⃰Please refer to The Croydon Local Offer SEND Support Document which outlines a variety of assessment tools and interventions that can be used to support and assess need in and across the different domains.**