

Submit a Request for a Statutory Assessment (RSA) – Guidance

These are the sections and questions that are in the online RSA form for education settings. Questions marked with an asterisk (*) are mandatory in the online form.

Young Person's Details

- First Name *
- Last Name *
- Known as (if different from above)
- Date of Birth *
- Home Address *
- Age *
- Have you received consent from the young person to complete this request? (if over 16) *
- Telephone Number
- Email Address
- Gender *
- Is their gender the same as the sex they were registered at birth? *
- Preferred Pronouns *
- Current Academic Year *
- Name of Educational Setting *
- Date Started at Setting *
- Name of Previous Educational Setting (if relevant)

Parent or Carer Details (up to 4 can be added)

- First Name *
- Last Name *
- Relationship to Child or Young Person *
- Telephone Number *
- Email Address *
- Postal Address *

- Do we have permission to email correspondence to this parent or carer? *
- What is the parent or carer's preferred method of contact? *
- Does this person have parental responsibility? *
- Is there anything that makes it difficult for this person to attend meetings? *
- Does this person have any specific communication or accessibility needs? *
- Are there any restrictions to contacting this parent or carer? *

Referrer Details

- Name of Person Completing This Request for Statutory Assessment (RSA) *
- Relationship to Child or Young Person *
- Organisation or Setting Name *
- Email Address *
- Telephone Number *

Young Person's Views

- Has the young person been supported to complete this? *
- At home I enjoy... *
- At school/this setting I like... *
- In the future I would like to... *
- My goals and hopes... *
- Things I am good at... *
- Things I find hard... *
- Things I need help with... *
- Who is important to me? Who helps me?

Parent or Carer Views

- What are you most proud of about your child or young person? *
- Are there any concerns regarding your child or young person's needs? *
- How do your child or young person's needs impact home life? *
- How do your child or young person's needs impact accessing education? *
- How does your child or young person communicate? *
- How do others communicate with them? *
- How do you involve your child or young person in decision-making about their future? *
- What are your hopes and aspirations for the future for your child or young person? *

The Child or Young Person's Story

- Please provide any relevant information about the child or young person's school journey that parents/carers or the young person think is important to share *

Current Social Care Involvement

- Is the child or young person currently accessing support from social care? *
 - o Current social care involvement * (You can enter details of up to three current social care involvements in this section)
 - o When did the involvement start?
 - o What is the reason for the involvement?
 - o Practitioner or social worker details
 - § Name
 - § Telephone Number
 - § Email Address

Previous Social Care Involvement

- Has the child or young person ever accessed support from social care? *
 - o Previous social care involvement * (You can enter details of up to five previous social care involvements in this section)
 - o When did the involvement start?
 - o When did the involvement end?
 - o What was the reason for involvement?
 - o Outcome of involvement
 - o Practitioner details
 - § Name
 - § Telephone Number
 - § Email Address

Current Health Service Involvement

- Is the child or young person currently accessing support from the health service? *
 - o Current health service involvement * (You can enter details of up to five current health service involvements in this section)
 - o Who is the child or young person open to?
 - o Details of diagnosis (if relevant)
 - o When did the involvement start?
 - o What is the reason for involvement?

o Professional contact details

§ Organisation name

§ Is this organisation out of county?

§ Where is it located?

§ Name of professional

§ Telephone Number

§ Email Address

Previous Health Service Involvement

• Has the child or young person ever accessed support from the health service? *

o Previous health service involvement (You can enter details of up to five previous health service involvements in this section)

o Details of diagnosis (if relevant)

o When did the involvement start?

o When did the involvement end?

o What was the reason for involvement?

o Outcome of involvement

Current Additional Support Involvement

• Is the child or young person currently accessing support from any additional services?

o Was targeted SEND funding applied for this child/young person? *

o Was the application successful? *

o What level of funding has been agreed? *

• Current additional support involvement * (You can enter details of up to five current additional support involvements in this section.)

o Who is the child open to?

o When did the involvement start?

o What is the reason for involvement?

o Outcome of involvement

§ Professional contact details

§ Organisation name

§ Name of professional

§ Telephone Number

§ Email Address

Previous Additional Support Involvement

- Has the child or young person ever accessed support from any other additional service?
 - o Was targeted SEND funding applied for this child/young person? *
 - o Was the application successful? *
 - o What level of funding was agreed? *
- Previous additional support involvement *(You can enter details of up to three previous additional support involvements in this section)
 - o When did the involvement start?
 - o When did the involvement end?
 - o What was the reason for involvement?
 - o Outcome of involvement

Communication and Interaction – Identified Needs, Support, and Future Outcomes

- Does the child or young person have communication and interaction needs?
 - o Please indicate the priority of this SEN, with 1 being the 1st priority *
 - o What is the child or young person's SEND range for this area of need? *
 - o What is the child or young person doing well in this area? *
 - o Identified Need Title * (You can enter up to five examples of a communication and interaction identified need)
 - § What is an identified need in relation to communication and interaction? *
 - § What is the impact of this need on access to education? *
 - § What strategies/provisions/interventions are in place to support this need? *
 - § What is the impact of the support that is in place? *
 - § Suggested SMART outcome for the end of next Key Stage *

Social Emotional and Mental Health (SEMH) – Identified Needs, Support, and Future Outcomes

- Does the child or young person have social emotional and mental health needs? *
 - o Please indicate the priority of this SEN, with 1 being the 1st priority *
 - o What is the child or young person's SEND range for this area of need? *
 - o What is the child or young person doing well in this area? *
 - o Identified Need Title * (You can enter up to five examples of a SEMH identified need)
 - § What is the identified need in relation to SEMH? *
 - § What is the impact of this need on access to education? *

§ What strategies/provisions/interventions are in place to support this need? *

§ What is the impact of the support that is in place? *

§ Suggested SMART outcome for the end of next Key Stage *

Cognition and Learning – Identified Needs, Support, and Future Outcomes

• Does the child or young person have cognition and learning needs? *

o Please indicate the priority of this SEN, with 1 being the 1st priority *

o What is the child or young person's SEND range for this area of need? *

o What is the child or young person doing well in this area? *

o Identified Need Title * (this section can be repeated up to 5 times)

§ What is the identified need in relation to cognition and learning? *

§ What is the impact of this need on access to education? *

§ What strategies/provisions/interventions are in place to support this need? *

§ What is the impact of the support that is in place? *

§ Suggested SMART outcome for the end of next Key Stage *

Physical and Sensory – Identified Needs, Support, and Future Outcomes

• Does the child or young person have physical and sensory needs? *

o Please indicate the priority of this SEN, with 1 being the 1st priority *

o What is the child or young person's SEND range for this area of need? *

o What is the child or young person doing well in this area? *

o Identified Need Title * (this section can be repeated up to 5 times)

§ What is the identified need in relation to physical and sensory? *

§ What is the impact of this need on access to education? *

§ What strategies/provisions/interventions are in place to support this need? *

§ What is the impact of the support that is in place? *

§ Suggested SMART outcome for the end of next Key Stage *

Independence – Identified Needs, Support, and Future Outcomes

• Does the child or young person have independence needs? *

o Please indicate the priority of this SEN, with 1 being the 1st priority *

o What is the child or young person's SEND range for this area of need? *

o What is the child or young person doing well in this area? *

o Identified Need Title * (this section can be repeated up to 5 times)

§ What is the identified need in relation to independence? *

§ What is the impact of this need on access to education? *

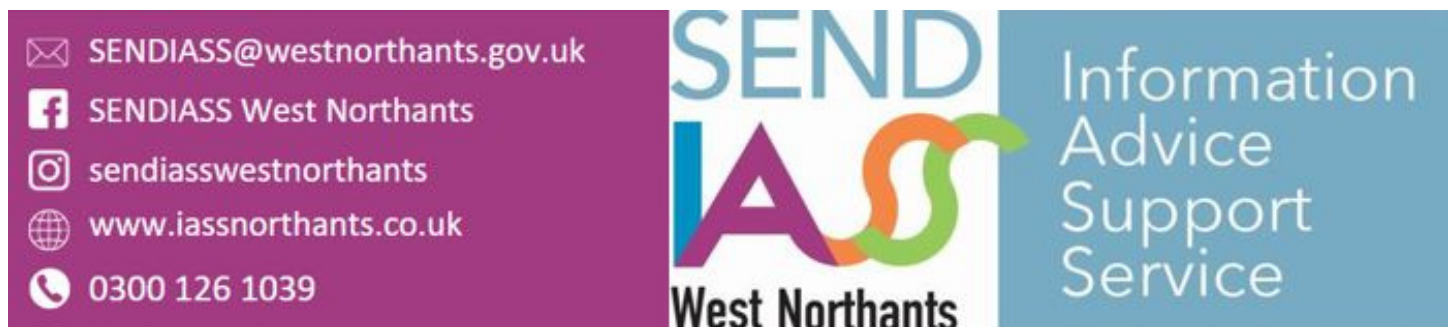
§ What strategies/provisions/interventions are in place to support this need? *

§ What is the impact of the support that is in place? *

§ Suggested SMART outcome for the end of next Key Stage *

Supporting Evidence

- Provide any other information around why an EHC needs assessment is being sought if you haven't already been able to detail this within the form *
- What outcomes are desired for the child or young person if an EHCP is issued? *
- Are you able to upload the one-page profile? *
- Are you able to upload evidence of attendance? *
- Are you able to upload the provision map? *
- Are you able to upload the development profile (up to 5 years old)? *
- Are you able to upload evidence of attainment data? *
- Are you able to upload at least two 'assess, plan, do, review' cycles? *
- Are you able to upload the last 2 school reports? *
- Please upload any other supporting evidence relevant to this request (such as diagnosis letters, medical letters, Educational Psychology reports and any other professional reports etc.)



SEND IASS West Northants Information Advice Support Service

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The banner features a purple background on the left with contact information, a central logo for SEND IASS West Northants with 'SEND' in blue, 'IASS' in purple and green, and 'West Northants' in black below. The right side has a blue background with the text 'Information Advice Support Service' in white.